

UNITED STATES DISTRICT COURT OF  
GEORGIA - NORTHERN DISTRICT

UNITED STATES OF AMERICA

v

AMIE M. BROWN

Case No: 1:18-CR-157-ELR

FILED IN CLERK'S OFFICE  
U.S.D.C. - Atlanta

MAR 26 2020

JAMES N. HATTEN, Clerk  
Deputy Clerk  
By: *[Signature]*

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EMERGENCY MOTION  
FOR COMPASSIONATE RELEASE

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COMES NOW, Amie M. Brown ["Brown"] proceeding pro se, respectfully moves this court for a compassionate release based on the Terminal Cancer she has (1): Metastatic Breast Cancer, Secondary Liver Cancer and Secondary Cancer of the Bone.

II JURISDICTION

On December 21, 2018, the President signed the First Step Act into law. Among the criminal justice reforms, Congress amended 18 USC 3582(c)(1)(A)(i) to provide the sentencing judge jurisdiction to consider a defendant's motion for reduction of sentence under the subsection when "the defendant has fully exhausted all administrative rights to appeal a failure of the Bureau of Prisons to bring a motion on the defendants behalf[.]" (First Step Act of 2018 at 119).

Ms. Brown has exhausted all administrative remedies by seeking a compassionate release through the prison at the Federal Correctional Institution in Aliceville, Alabama. Ms. Brown filed her Compassionate Release with her Case Manager, Mr. Edgeworth on March 7, 2020.

III SENTENCE REDUCTION AUTHORITY  
UNDER 18 U.S.C. 3582(c)(1)(A)(i)

This Court has discretion to reduce the term of imprisonment imposed in this case based on 18 USC 3582(c)(1)(A)(i), which states in relevant part that the Court "may reduce the term of imprisonment...after consideration [of] the factors set forth in section 3553(a) to the extent that they are applicable, if it finds that extraordinary and compelling reasons warrant such a reduction[.]" Pursuant to the requirement of 28 USC 994(t), as authorized by 28 USC 994(a)(2)(C), the Sentencing Commission promulgated a policy statement that sets out the criteria and examples of "extraordinary and compelling reasons" In USSG 1B1.13 that include Ms. Brown's circumstances:

The defendant is suffering from a terminal illness (i.e. a serious and advanced illness with an end of life trajectory). A specific prognosis of life expectancy (i.e., a probability of death within a specific time period) is not required. Examples include metastatic solid-tumor cancer, amyotrophic lateral sclerosis (ALS), end-stage organ disease, and advanced dementia. USSG 1B1.13, COMMENT N.1 (A)(i) (Nov. 1, 2018).

Ms. Brown has exhausted available administrative remedies. This Court's exercise of sentencing discretion based on the extraordinary and compelling reasons will depend on Ms. Brown's current medical condition and service of the substantial portion of her sentence. Should this Court so request, this motion will be supplemented with medical records and other information as needed.

IV. FACTUAL AND PROCEDURAL BACKGROUND

Ms. Brown has been in connection with present offense of wire fraud in violation of 18 USC 1343 since October 29, 2018.



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She was sentenced to 24 months of imprisonment followed by supervised release. She has served over three-quarters of the sentence and imprisonment imposed by the Court. Her projected release date according to the Bureau of Prisons is July 07, 2020.

During the service of her sentence, it was discovered in 01/13/2020 that Ms. Brown has Breast Cancer. She began complaining of her symptoms in January/February 2019, "of swelling, and secreting breast milk" and repeatedly conveyed to the Health Services department of breast cancer history in her family (Maternal Grandmother, Mother, Sister, two (2) Maternal Aunts and First Cousin.) Her Mother and Grandmother are both deceased due to Breast Cancer. The first ultrasound that Ms. Brown received was on 12/18/2019. On 01/13/2020, almost a year after her attending sick call and complaining of her symptoms and history of cancer, she finally received her first breast mammogram. Then on 02/05/2020, she received more tests. On March 05, 2020, she received yet again more tests, CT Scan and pain medication from BAPTIST Hospital - which clearly indicate she is suffering from:

- METASTATIC BREAST CANCER
- SECONDARY LIVER CANCER
- SECONDARY CANCER OF THE BONE

On March 08/2020, she was prescribed Promethazine and Hydrocodone from the Hospital, but the FCI prison did not give her those medications; instead, they prescribed OxyCoDone 10 mg - two (2) times per day.

At the time of this writing, Ms. Brown has not received any radiation, chemotherapy, or any other cancer treatments in an attempt to eradicate the cancer, or at least prevent the cancer from spreading. Thus, Ms. Brown has filed a compassionate release request.

Ms. Brown's health continues to decline. Indeed, as her extensive medical records enclosed with this motion show, as the Doctor ordered on March 05, 2020, an "URGENT referral". Ms. Brown is fatigued, weak and confused. Her prognosis remains "poor" for her "Metastatic Breast Cancer, Secondary Liver Cancer and Secondary Cancer of the Bone."

#### THE BOP CONCEDES WITH BROWN'S MEDICAL DIAGNOSIS:

The Government concedes that Ms. Brown is eligible for Compassionate Release as stated in the Warden's Memorandum to the Office of the General Counsel, which states in part:

" We have received inmate Brown's request for Compassionate request for Consideration..., And have determined she meets the criteria..."

" Our Medical Staff have deemed this cancer as terminal with a life expectancy of three to six months. [Attachment 1- Dated March 17, 2020].

In this motion, Ms. Brown includes her affidavit with Full Medical Records to substantiate her claims in this motion. see [Attachment 2 - Declaration/Medical Records].

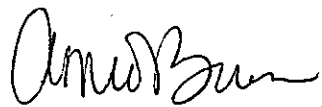
As part of the First Step Act that the President of the United States signed on December 21, 2018, Congress removed a major obstacle from judicial review of sentences to determine whether conditions such as terminal illness made a sentence reduction "sufficient, but not greater than necessary" under 18 USC 3553(a). Under the First Step Act, this Court is afforded jurisdiction to make the 3553(a) determination of whether Ms. Brown's time in prison, in light of her age (49 years old), terminal illness, and other debilitating conditions is 'sufficient, but not greater than necessary' to accomplish the goals of sentencing.

Ms. Brown's Condition worsens each passing day. Her family at home are waiting for her in order to get her the best medical help available for all her cancer diagnosis. Ms. Brown would like to the court to know, though, that it is her intention to comply with any conditions placed on her as far as Probation or home or hospital confinement so long as those conditions account for her terminal illness. Her family care deeply for Ms. Brown and will see to her care and her compliance with her conditions.

#### V. CONCLUSION

For the foregoing reasons, Ms. Brown respectfully requests that this Court grant reduction in sentence to time served and amend the conditions of supervised release to accommodate the release plan as above-articulated.

RESPECTFULLY SUBMITTED this 17th day of MARCH, 2020

 03/23/20  
Amie M. Brown

AMIE BROWN-CR Motion

2 OF 2



# Attachment 1

- Amie M. Brown - Declaration
- Warden Approval for Compassionate Release
- JoAnn Tragas' Declaration



DECLARATION/AFFIDAVIT OF  
AMIE M. BROWN # 71676-019

My name is Amie M. Brown # 71676-019. I am over 21 years of age. I am currently housed in the Federal Correctional institution in Aliceville, (FCI ALICEVILLE) - P.O Box 4000, Aliceville, AL 35442. I am writing this Declaration/Affidavit of my own free will and I am fully competent to make this Declaration and I have personal knowledge of the facts stated in this Declaration. To my knowledge, all the facts stated in this declaration are true and correct. I arrived at Federal Correctional Institution in Aliceville on November 20, 2018.

1. From my first day at FCI Aliceville, on November 20, 2018, until the end of 2019, I have repeatedly complained of breast pain, redness, and discharge; asked to have an ultrasound or mammogram; as well as repeatedly informing the medical staff of my family history of Breast Cancer, and was repeatedly denied testing and/or scans. These failures to respond by staff and lack of proper medical care has resulted in my current diagnosis.
2. As of today, March 17, 2020, I have terminal Metastatic Breast Cancer, Secondary Cancer to the liver and secondary cancer of the Bone.
3. I have also received the Warden's approval for Compassionate Release [Ex. A ]
4. 01/16/2019 Report pain in right breast. [Ex. 1].
4. On 01/16/2019 - I attended sick-call and complained about pain in my left breast for two months - I also reported Family Cancer history in; Maternal Grandmother, Mother, two Aunts, Cousin and sister. Maternal Grandmother and Mother are deceased. [Ex. 1].
5. On 02/14/2019 - Sick-Call - complained about "Coughing up thick yellow Green yuck, Producing Milk in both breast, swelling up like a balloon" Reported Family Cancer history. [Ex. 2, 2(a) & (b)].
6. On 03/28/2019-Sick call, complained of secreting breast milk, migraine, vomiting, diarrhea. [Ex. 3, 3(a)].
7. On 04/01/2019- Sick Call, Complained of Nipple Discharge and burning pain to the right nipple. [Ex. 4,(a) & (b)].
8. On 12/18/2019 - First Breast ultrasound done at Aliceville Health Services, by an outside contractor. 2 cm mass found, suspicious of malignancy breast biopsy and mammogram suggested. \*\* First, Ultra sound performed ELEVEN MONTHS AFTER First Complained as stated in number 1. [Ex.5].
9. On 01/02/2020 - BOP Health services; Chronic Care appt. with Dr. Li, Refilled Depo-Provera shot, shows a schedule for biopsy on 02/07/20, priority-Routine - No treatment, Dr. only ordered labs and biopsy. Told Ms. Brown that the results from her ultrasound "looked to be benign, but we'll do a biopsy to confirm. "you have nothing to worry about". Dr. Li was made aware of Ms. Brown's Family History of Cancer. [Ex.6, 6(a)-(c)].
10. 01/13/2020; Pickens County Medical Center - Hospital, Radiology-Surgical Consult. Exam for - Diagnostics mammogram, bi lateral CAD and targeted right breast ultrasound. Surgeon suggests all are suggestive of malignancy - Results show malignant masses in right breast and lymph node - auxiliary.[Ex. 7, 7(a)].
11. 02/18/2020; DCH/University Surgical Associates - Biopsy & Ultrasound performed 02/13/20, Letter from Dr. Menard with review of pathology results, and states that "Amie Brown" needs to see oncology A.S.A.P. Also wants to see Ms. Brown back in the office to discuss the results with her, attached note is Dr. Menard's office visit order  
-02/13/2020; Results of ultrasound on Right breast shows invasive tumors, on Right axilla shows metastatic carcinoma, compatible with breast primary. see  
- 02/13/2020; Report- complete Breast Ultrasound (left & right) was performed.  
- 02/05/2020; Packet also includes results from consultation/office visit [Ex. 8, 8(a)-(m)].

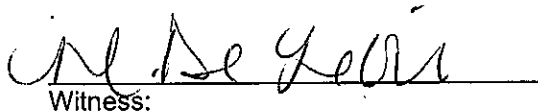
AMIE BROWN, DECLARATION 1 OF 2



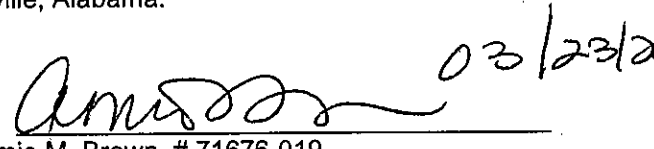
12. 02/20/2020; BOP Health Services - Complaint of thoracic pain worsening over past two weeks.- Provider say's to F/U after oncology consult. [Ex. 9, 9(a)-(c)].
13. 03/04/2020; Peckins County Medical Hospital - Provider from DCH in Tuscaloosa -Consultation with oncologist. Suggested I see surgeon A.S.A.P. and recommended CT scan for staging at BOP Health Services. [Ex. 10].
14. 03/05/2020; Right swollen, lower chest pain radiating to back, pain 10/10 -Blood Pressure 169/103, Shortness of breath, sent by ambulance to Baptist Hospital. At Baptist Hospital: CT chest, Abdomen, Pelvis w/contrast, Chest X-Ray, ECG 12 lead now, & ED Documentation. Prescriptions attached. \*\*\*Diagnosis: METASTATIC BREAST CANCER - SECONDARY LIVER CANCER - SECONDARY CANCER TO BONE. \*\*\* Lab tests completed, Patient discharged back to facility, follow up with oncology. At BOP Health Services; Chart review encounter performed, patient told provider the diagnosis. [Ex. 11 - 11(a)-(m)].
15. 03/06/2020; BOP Health Services- Follow up, Sent to ED yesterday for severe pain. CT shows widespread metastatic disease. Oxycodone ordered for pain. [Ex. 12].
16. 03/08/2020; BOP Health Services; Administrative Note, "spoke with on call provider. Order given for 10 mg Oxycodone BID PRB. RBVO.
17. 03/17/2020; I have just received the Wardens response to my compassionate release application. She has approved my request which states in part: " Our Medical staff have deemed this cancer as terminal with a life expectancy of three to six months" (emphasis added).

I declare under Jurat 28. U.S.C 1746, Penalty of perjury under the laws of the United States that the foregoing Declaration is True and Correct.

Executed : March 23, 2020, at the Federal Correctional Institution in Aliceville, Alabama.

  
Witness:

Miriam De Leon  
#1 26990 - 045

 03/23/20  
Amie M. Brown, # 71676-019  
Federal Correctional Institution -Aliceville  
P.O Box 4000  
Aliceville, AL 35442

AMIE BROWN DECLARATION 2022





U.S. Department of Justice  
Federal Bureau of Prisons  
Federal Correctional Institution  
P.O. Box 445  
Aliceville, Alabama 35442

*Office of the Warden*

March 17, 2020

**MEMORANDUM FOR OFFICE OF GENERAL COUNSEL**

FROM:

  
Patricia V. Bradley, Warden

SUBJECT:

Compassionate Release/Reduction in Sentence  
Brown, Amie M., Register Number: 71676-019

We have reviewed inmate Brown's request for consideration under the provisions of Title 18, United States Code, Section 3582 (c) (1) (A), and determined she meets the criteria set forth in Bureau of Prisons' Program Statement 5050.50.

Our medical staff have deemed this cancer as terminal with a life expectancy of three to six months.

We are therefore, referring this matter to your office with our recommendation inmate Brown be approved for released under the Bureau's Compassionate Release/Reduction in Sentence. Attached please find information to support our recommendation.

Should you need additional information, please feel free to contact me at (205) 373-5000.



DECLARATION  
OF  
JOANNE TRAGAS, # 51090-018

My Name is JOANNE TRAGAS, United States Marshal Number 51090-018. I am currently incarcerated at the Federal Correctional Institution (FCI) in Aliceville, Alabama. I am writing this Declaration of my own free will and am fully competent to make this statement or Declaration and I have personal knowledge of the facts stated in this Declaration. To my knowledge, all the facts as stated in this declaration are true and correct.

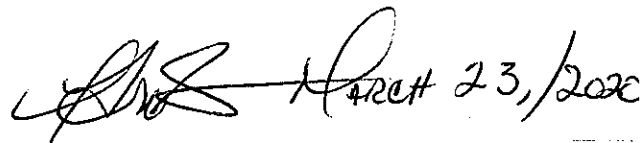
1. On 06/20/2012 While house in FCI Danbury, CT I was diagnosed of having, 1) "High Grade Squamous Intraepithelial Lesion (HSIL), 2) "Human Papilloma Virus" (HPV), and 3). "Uterine Fibroids". The Dr. there advised I needed to have surgery A.S.A.P. -- Today's date is 03/25/2020 (8 years later), I continue to suffer I am still seeking treatment and surgery to no avail.
2. 06/20/2012: "Cytology Gyn Report" from Western Connecticut Health Network, While incarcerated at FCI Danbury, was diagnosed with "High Grade Squamous Intraepithelial Lesion (HSIL). [Ex. F1, F1(a)].
3. 06/21/2012: "Cytology GYN Report" from Western Connecticut Health network, was diagnosed with "Human Papilloma Virus (HPV)."
4. 07/13/2012: Dr. Robert T. Green, Jr. M.D., Rph. advised me that she must have surgery A.S.A.P and supplied her with educational materials on the procedure and about the diagnosis. [ Ex. F1(b),(c),(d),(e) ].
5. 11/13/2013: I was transferred from FCI Danbury to FCI Aliceville, due to a mission change. without having had the surgery that Dr. Green advised her she needed, or any other treatments for her condition.
6. 11/16/2013: Dr. I. McCullar, the physician at FCI Aliceville, scheduled a Colposcopy appointment with an outside source.
7. 12/02/2014: I was transported to Pickens County Medical Center. Dr. John McDonald, Jr. with the OB/GYN department, was to perform a biopsy. Dr. McDonald could not perform all necessary tests during the biopsy and advised Ms. Tragas that he was unable to diagnose her, and explained that the reason was " I cannot get a clear view of your uterus and ovaries because your masses are too large, and are obstructing my view. I will need to refer you to a specialist". [ Ex. O ].
8. Between 12/10/2014 & 09/19/16: I sent Numerous "cop-outs" to the Health Services' Records Department requesting my biopsy results from the biopsy performed on December 2, 2014. [ Ex. E-4, L, C, D ]. I also personally spoke with numerous medical staff at health services as well as Mrs. Cook, (Medical Records) on several occasions, I promised again and again that they would obtain the biopsy results. For close to 2 years, Dr. Griffin, refused to book the "Specialist OB-GYN" 'until the biopsy results were received.
9. 09/20/2016: The next day, September 20, 2016, the biopsy results were obtained by Nurse Practitioner Ms. Word law. 638 DAY'S AFTER THE BIOPSY. Dr. Griffin examined me and stated just one of my fibroids grew to the size of 12 weeks. He performed another pap smear and advised that the biopsy results were too old, and re-scheduled me to see the "Specialist OB-GYN" that was originally referred by Dr. McDonald on 12/02/2014. [ Exhibit, E-5- & Biopsy results, E2, E3 ].
10. 12/12/2016: I sent an Electronic Staff message via email to Ms. Wordlaw to let her know that I still had not been taken to see the specialist. Hard copy was mailed via USPS. No response ever received. [ Exhibit C ].
11. 12/27/2016: I sent another Electronic Staff message via email to health Services explaining in detail how many times I was turned away from Health Services. Hard copy mailed via USPS. No response ever received. [ Exhibit D ].



12. 03/02/2017: I was transported to "Specialty surgeon OB/GYN", Dr. Cox. He performed all tests and recommended I receive surgery for a full hysterectomy A.S.A.P. I agreed.
13. 03/14/2017: I sent a letter to Dr. Cox, cc'ing it to Health Services [ Exhibit E ].
14. 03/20/2017: I wrote another letter to Dr. Cox [ Exhibit F ].
15. 03/27/2017: I received a response from the Canadian Consulate responding to my request for assistance in obtaining Medical assistance from Health Services. The Canadian Government also enclosed a reply from the Warden. [ Exhibit A B]
16. 05/08/2017: I sent a reply to the letter that the Canadian Government sent to me (above) and also CC'd to the Warden. [ Exhibit G ].
17. Late 2018/Early 2019: I was transported to Dr. McDonald - the physician I saw on 12/02/2014, (who was unable to properly diagnose me). Dr. McDonald stated during the consultation (which was verbal only), that he had "no biopsy results". He also informed me that he would need to make a 14"-16" vertical incision of my abdomen in order to "see what he can take out". A total hysterectomy is now performed Laproscopically or with a 3"-4" horizontal "bikini incision. I refused to be operated on by him during that consultation. \*\*Note: I was under the impression I was being taken to Dr. Cox for the surgery, instead I was informed by Medical staff when I returned to Medical that day, that "It took too long to take you out for surgery, Dr. Cox no longer Contracts with our facility"
18. May, 2019: I was called to go on an outside medical trip for the surgery mentioned above (with Dr. McDonald.) I refused At that time I was attempting to obtain a Treaty Transfer to my home Country in Canada. I would have preferred to have surgery in Canada (had the Treaty Transfer been approved.) or with Dr. Cox. When I inquired with Health Services why another (more adept) surgeon could not perform my surgery; to which they replied, 'unfortunately, we don't have another OB/GYN in this area that wants to contract with the Prison'.
19. 02/25/2020; Mr. Williamson; a Medical Licensed Practioner in Health Services said, "Enough of this back and forth with your issue - we need to do an ultrasound to see where you're at and then get your surgery.
20. Since my diagnosis in FCI Danbury in June 2012, I have exhausted all avenues of attempting to receive proper medical care, I have reached out to the Canadian Government, whilst they attempted to help, even they were unsuccessful. I have filed Administrative Remedies only to be ignored at the low lever and receive the run around, or they documents were not filed or Ignored. The negligence, deliberate indifference, and lack of treatment have caused me such Mental and Emotional anguish at the mere mention of Health Services.
21. As of today's date, March 22, 2020 I am awaiting an ultrasound, to which I am very anxious to receive because, I am in severe pain, and all my other symptoms have heightened, My Pelvic issue may have turned to cancer after leaving it untreated for over close to 8 years.
22. I have had to personally witness the very slow and painful deaths of Mrs. Rosemary Ofume and Hazel McGary, who lived in my unit. They both died due to nothing but negligence, they repeatedly and consistently went to Health Services as well. Only to be told "You are faking it go back to your unit". I don't want the same to happen to me or anyone else.
23. Lastly, I have also witnessed inmate Amie M. Brown #71676-019, struggle to get any medical treatment for her breast issues since her intake on November, 2018. Dr. Richard Griffin, was clearly aware of her strong family history of Breast Cancer. He did nothing. The domino effect of deliberate indifference and negligence from Medical Departmen here, sadly has now caused her to have a Diagnosis of METASTATIC BREAST CANCER - LIVER CANCER & BONE CANCER & the Wardens Approval of Compassionate Release stating Ms.Brown has "Three to Six months left to live"  
[Attachment 1]

I declare under Jurat 28 USC 1746 penalty of perjury under the laws of the United States that the foregoing statement is true and correct.

Date this 23 day of MARCH, 2020 In FCI Aliceville, Alabama

 March 23, 2020

DECLARATION OF JOANNE TRAGAS 20F2

Joanne Tragas # 51090-018  
FCI Aliceville  
P.O Box 4000  
ALICEVILLE, AL 35442



# Attachment 2

- Amie Brown - Declaration
- Bureau of Prisons' Medical Records



DECLARATION/AFFIDAVIT OF  
AMIE M. BROWN # 71676-019

My name is Amie M. Brown # 71676-019. I am over 21 years of age. I am currently housed in the Federal Correctional institution in Aliceville, (FCI ALICEVILLE) - P.O Box 4000, Aliceville, AL 35442. I am writing this Declaration/Affidavit of my own free will and I am fully competent to make this Declaration and I have personal knowledge of the facts stated in this Declaration. To my knowledge, all the facts stated in this declaration are true and correct. I arrived at Federal Correctional Institution in Aliceville on November 20, 2018.


1. From my first day at FCI Aliceville, on November 20, 2018, until the end of 2019, I have repeatedly complained of breast pain, redness, and discharge; asked to have an ultrasound or mammogram; as well as repeatedly informing the medical staff of my family history of Breast Cancer, and was repeatedly denied testing and/or scans. These failures to respond by staff and lack of proper medical care has resulted in my current diagnosis.
2. As of today, March 17, 2020, I have terminal Metastatic Breast Cancer, Secondary Cancer to the liver and secondary cancer of the Bone.
3. I have also received the Warden's approval for Compassionate Release [Ex. A ]
4. 01/16/2019 Report pain in right breast. [Ex. 1].
4. On 01/16/2019 - I attended sick-call and complained about pain in my left breast for two months - I also reported Family Cancer history in; Maternal Grandmother, Mother, two Aunts, Cousin and sister. Maternal Grandmother and Mother are deceased. [Ex. 1].
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12. 02/20/2020; BOP Health Services - Complaint of thoracic pain worsening over past two weeks.- Provider say's to F/U after oncology consult. [Ex. 9, 9(a)-(c)].
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14. 03/05/2020; Right swollen, lower chest pain radiating to back, pain 10/10 -Blood Pressure 169/103, Shortness of breath, sent by ambulance to Baptist Hospital. At Baptist Hospital: CT chest, Abdomen, Pelvis w/contrast, Chest X-Ray, ECG 12 lead now, & ED Documentation. Prescriptions attached. \*\*\*Diagnosis: METASTATIC BREAST CANCER - SECONDARY LIVER CANCER - SECONDARY CANCER TO BONE. \*\*\* Lab tests completed, Patient discharged back to facility, follow up with oncology. At BOP Health Services; Chart review encounter performed, patient told provider the diagnosis. [Ex. 11 - 11(a)-(m)].
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I declare under Jurat 28. U.S.C 1746, Penalty of perjury under the laws of the United States that the foregoing Declaration is True and Correct.


Executed : March 23, 2020, at the Federal Correctional Institution in Aliceville, Alabama.



Witness:

Oralia Acevedo

#90645479

 03/23/20

Amie M. Brown, # 71676-019  
Federal Correctional Institution -Aliceville  
P.O Box 4000  
Aliceville, AL 35442



**Bureau of Prisons  
Health Services  
Clinical Encounter - Administrative Note**

Inmate Name:	BROWN, AMIE M	Sex:	F	Race:	WHITE	Reg #:	71676-019
Date of Birth:	06/06/1970	Provider:	Bailey, Sharon RN	Facility:	ALI	Unit:	C02
Note Date:	01/16/2019 14:28						

Admin Note - Scheduling Note encounter performed at Health Services.

**Administrative Notes:**

**ADMINISTRATIVE NOTE 1**

*(right breast)*  
**Provider:** Bailey, Sharon RN

Inmate reporting pain in her left breast for two months and requesting medication changes. Scheduled for provider to evaluate.

**Copay Required:** No

**Cosign Required:** No

**Telephone/Verbal Order:** No

Completed by Bailey, Sharon RN on 01/16/2019 14:29



EX. 2

**Bureau of Prisons  
Health Services  
Clinical Encounter**

Inmate Name: BROWN, AMIE M  
Date of Birth: 06/06/1970  
Encounter Date: 02/14/2019 10:26

Sex: F Race: WHITE  
Provider: Bailey, Sharon RN

Reg #: 71676-019  
Facility: ALI  
Unit: C02

Nursing - Sick Call Note encounter performed at Health Services.

**SUBJECTIVE:**

**COMPLAINT 1** Provider: Bailey, Sharon RN

**Chief Complaint:** Cold or Flu Symptoms

**Subjective:** I have been coughing for five days and it seems to be getting worse. I'm on Ibuprofen 800 mg twice a day and I took it about 7:30 this morning. I'm coughing up thick yellow green yuck. While I'm here, can I get my Risperdal switched? I've weaned myself down to almost nothing. I'm producing breast milk and swelling up like a balloon from the Risperdal.

**Pain:** No

→ Not looked at  
by nurse

**ROS:**

**Pulmonary**

**Respiratory System**

Yes: Cough - Productive of thick green or brown mucus

**OBJECTIVE:**

**Temperature:**

Date	Time	Fahrenheit	Celsius	Location	Provider
02/14/2019	10:29 ALI	97.6	36.4	Oral	Bailey, Sharon RN

**Pulse:**

Date	Time	Rate Per Minute	Location	Rhythm	Provider
02/14/2019	10:29 ALI	96	Via Machine	Regular	Bailey, Sharon RN

**Respirations:**

Date	Time	Rate Per Minute	Provider
02/14/2019	10:29 ALI	14	Bailey, Sharon RN

**Blood Pressure:**

Date	Time	Value	Location	Position	Cuff Size	Provider
02/14/2019	10:29 ALI	126/87	Left Arm	Sitting		Bailey, Sharon RN

**SaO2:**

Date	Time	Value(%)	Air	Provider
02/14/2019	10:29 ALI	100	Room Air	Bailey, Sharon RN

**Weight:**

Date	Time	Lbs	Kg	Waist Circum.	Provider
02/14/2019	10:29 ALI	177.0	80.3		Bailey, Sharon RN

**Exam:**

**General**

**Affect**

Yes: Pleasant, Cooperative

**Appearance**

Yes: Appears Well, Alert and Oriented x 3

No: Appears Distressed, Appears in Pain, Writhing in Pain, Acutely Ill



Inmate Name: BROWN, AMIE M  
 Date of Birth: 06/06/1970  
 Encounter Date: 02/14/2019 10:26

Sex: F Race: WHITE  
 Provider: Bailey, Sharon RN

Reg #: 71676-019  
 Facility: ALI  
 Unit: C02

**Exam:****Skin****General**

Yes: Within Normal Limits, Dry, Skin Intact, Warmth

**Ears****Tympanic Membrane**

Yes: Within Normal Limits

**Canal**

Yes: Within Normal Limits

**Nose****General**

No: Congestion

**Mouth****Pharynx**

Yes: Erythema, Sinus Drainage

No: Swelling, Tonsillar Hypertrophy, White Plaques

**Pulmonary****Observation/Inspection**

No: Respiratory Distress

**Auscultation**

Yes: Expiratory-Wheezing R

**Cardiovascular****Observation**

Yes: Within Normal Limits, Normal Rate, Regular Rhythm

**Musculoskeletal****Gait**

Yes: Normal Gait

**ASSESSMENT:****Cold Symptoms**

Despite request for her to cease, inmate making vocal sounds during auscultation of lungs. Possible expiratory wheeze heard on right side, otherwise clear. Non-productive cough observed. Afebrile. Pharynx red, no inflammation, milky sinus drainage present. Bilateral ears WNL. MLP informed of clinical presentation.

**PLAN:****Disposition:**

To be Evaluated by Provider

**Other:**

Inmate signed a Medical treatment refusal form for the Risperdal. Inmate reported history depression, anxiety, and bipolar disorder. Only diagnosis in BEMR is unspecified mood disorder. Inmate is requesting alternative treatment with a mood stabilizer for bipolar disorder. Advised inmate to address issue with provider at next encounter.

**Patient Education Topics:**

**Date Initiated** Format  
 02/14/2019 Counseling

**Handout/Topic**  
 Plan of Care

**Provider**  
 Bailey, Sharon

**Outcome**  
 Verbalizes  
 Understanding



Inmate Name: BROWN, AMIE M  
Date of Birth: 06/06/1970  
Encounter Date: 02/14/2019 10:26

Sex: F Race: WHITE  
Provider: Bailey, Sharon RN

Reg #: 71676-019  
Facility: ALI  
Unit: C02

<u>Date Initiated</u>	<u>Format</u>	<u>Handout/Topic</u>	<u>Provider</u>	<u>Outcome</u>
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Copay Required: Yes

Cosign Required: No

Telephone/Verbal Order: No

Completed by Bailey, Sharon RN on 02/14/2019 10:43

Requested to be reviewed by Hunter-Buskey, Robin DHSc, CCHP, CDE, PA-C.

Review documentation will be displayed on the following page.



Ex. 3

**Bureau of Prisons  
Health Services  
Clinical Encounter**

Inmate Name: BROWN, AMIE M	Sex: F	Race: WHITE	Reg #: 71676-019
Date of Birth: 06/06/1970	Provider: Knopp, E. RN, BSN	Facility: ALI	Unit: C02
Encounter Date: 03/28/2019 08:43			

Nursing - Sick Call Note encounter performed at Health Services.

**SUBJECTIVE:**

**COMPLAINT 1**      Provider: Knopp, E. RN, BSN

**Chief Complaint:** Headache

**Subjective:** "I have a migraine and vomiting, diarrhea, and I am excreting breast milk. I think it is my psych meds they need to be changed."

**Pain:** Not Applicable

**OBJECTIVE:****Temperature:**

<u>Date</u>	<u>Time</u>	<u>Fahrenheit</u>	<u>Celsius</u>	<u>Location</u>	<u>Provider</u>
03/28/2019	09:07 ALI	97.3	36.3	Oral	Knopp, E. RN, BSN

**Pulse:**

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Location</u>	<u>Rhythm</u>	<u>Provider</u>
03/28/2019	09:07 ALI	97	Via Machine	Regular	Knopp, E. RN, BSN

**Respirations:**

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Provider</u>
03/28/2019	09:07 ALI	17	Knopp, E. RN, BSN

**Blood Pressure:**

<u>Date</u>	<u>Time</u>	<u>Value</u>	<u>Location</u>	<u>Position</u>	<u>Cuff Size</u>	<u>Provider</u>
03/28/2019	09:07 ALI	139/83				Knopp, E. RN, BSN

**SaO2:**

<u>Date</u>	<u>Time</u>	<u>Value(%)</u>	<u>Air</u>	<u>Provider</u>
03/28/2019	09:07 ALI	100	Room Air	Knopp, E. RN, BSN

**Weight:**

<u>Date</u>	<u>Time</u>	<u>Lbs</u>	<u>Kg</u>	<u>Waist Circum.</u>	<u>Provider</u>
03/28/2019	09:07 ALI	174.0	78.9		Knopp, E. RN, BSN

**Exam:****General****Affect**

Yes: Pleasant, Cooperative, Flat

**Appearance**

Yes: Appears Well, Alert and Oriented x 3

**Skin****General**

Yes: Within Normal Limits, Dry, Skin Intact, Warmth

**Eyes****General**

Yes: PERRLA, Extraocular Movements Intact



Inmate Name: BROWN, AMIE M  
Date of Birth: 06/06/1970  
Encounter Date: 03/28/2019 08:43

Sex: F Race: WHITE  
Provider: Knopp, E. RN, BSN

Reg #: 71676-019  
Facility: ALI  
Unit: C02

**Exam:****Breast****Breast Tissue**

Yes: Normal Exam, Tenderness

**ASSESSMENT:****Medication Side Effect**

Chart review: inmate currently prescribed risperidone 1mg, trazdone 75mg, and buspar 10mg with health summary of unspecified mood disorder. Per BEMR psychology referred inmate to Health Services for medication regime. Per psychology notes inmate is MH Care level -1 and inmate shows no significant level of functional impairment associated with a mental illness and demonstrates no need for regular mental health interventions, and has no history of serious functional impairment due to mental illness.

Inmate c/o breast tenderness with nipple discharge that is like breast milk x 2 months. Inmate states white discharge noted in bra and will drip from bilateral breasts while taking a warm shower. No drainage noted upon examination at this time.

States weight gain since being prescribed above medications. States hard to concentrate for very long. Inmate believes trazadone needs to be reduced, buspar needs to be increased, and risperdone needs to be changed. States history of bi-polar.

**PLAN:****Disposition:**

To be Evaluated by Provider

**Patient Education Topics:**

Date Initiated Format  
03/28/2019 Counseling

Handout/Topic  
Plan of Care

Provider  
Knopp, E.

Outcome  
Verbalizes  
Understanding

Copay Required: Yes

Cosign Required: Yes

Telephone/Verbal Order: No

Completed by Knopp, E. RN, BSN on 03/28/2019 13:48

Requested to be cosigned by Williamson, Jim CRNP.

Cosign documentation will be displayed on the following page.



EX-4

**Bureau of Prisons  
Health Services  
Clinical Encounter**

Inmate Name: BROWN, AMIE M  
Date of Birth: 06/06/1970  
Encounter Date: 04/01/2019 10:57

Sex: F Race: WHITE  
Provider: Williamson, Jim CRNP

Reg #: 71676-019  
Facility: ALI  
Unit: C02

Mid Level Provider - Evaluation encounter performed at Health Services.

**SUBJECTIVE:**

**COMPLAINT 1** Provider: Williamson, Jim CRNP

**Chief Complaint:** Other Problem

**Subjective:** Bilat nipple discharge and burning sensation to left nipple.

*right nipple*

C/O white "milk" nipple discharge from Bilat breasts x 2 months. Also C/O burning and pain to left nipple x 1 month. Describes burning as constant but seems to worsen during menses. Denies finding lumps or masses on self breast exam. Denies chest pain or shortness of breath. Denies abdominal pain or nausea/vomiting. She is taking risperidone 1 mg daily. "can we change risperidone to something else?"

Alert, oriented x4. No sign of distress. Respirations unlabored, lungs clear and equal Bilat. Skin warm and dry, no edema, S1/S2, no murmurs.

Breast Exam with staff escort present: Breasts are symmetrical, no erythema, swelling, dimpling, lesions, or ulcers noted to Bilat breasts. No lumps or masses noted to Bilat breasts on exam, no lymphadenopathy noted, no nipple discharge noted on exam.

According to Psych Diagnosis and Care Level Formulation 12/2018: Although she reported a history of mental illness, she currently presents as asymptomatic and, therefore, she does not demonstrate the need for regular MH interventions.

**Plan:**

Nipple discharge likely due to increased prolactin levels as a side effect of risperidone. I do not see an indication for Anti-Psych medication at this time. Will taper off risperidone. Will order ultrasound of left breast.

**Pain:** Yes

**Pain Assessment**

**Date:** 04/02/2019 11:44  
**Location:** Breast-Left  
**Quality of Pain:** Burning  
**Pain Scale:** 6  
**Intervention:** Ultrasound  
**Trauma Date/Year:**  
**Injury:**  
**Mechanism:**  
**Onset:** 1 Month  
**Duration:** 1 Month  
**Exacerbating Factors:** menses  
**Relieving Factors:** none  
**Reason Not Done:**  
**Comments:**



Inmate Name: BROWN, AMIE M  
 Date of Birth: 06/06/1970  
 Encounter Date: 04/01/2019 10:57

Sex: F Race: WHITE  
 Provider: Williamson, Jim CRNP

Reg #: 71676-019  
 Facility: ALI  
 Unit: C02

**OBJECTIVE:****Temperature:**

Date	Time	Fahrenheit	Celsius	Location	Provider
04/01/2019	14:10 ALI	97.1	36.2		Barry, Shevone MA

**Pulse:**

Date	Time	Rate Per Minute	Location	Rhythm	Provider
04/01/2019	14:10 ALI	96			Barry, Shevone MA

**Respirations:**

Date	Time	Rate Per Minute	Provider
04/01/2019	14:10 ALI	18	Barry, Shevone MA

**Blood Pressure:**

Date	Time	Value	Location	Position	Cuff Size	Provider
04/01/2019	14:10 ALI	126/82	Left Arm	Sitting	Adult-regular	Barry, Shevone MA

**SaO2:**

Date	Time	Value(%)	Air	Provider
04/01/2019	14:10 ALI	100		Barry, Shevone MA

**Weight:**

Date	Time	Lbs	Kg	Waist Circum.	Provider
04/01/2019	14:10 ALI	173.0	78.5		Barry, Shevone MA

**ASSESSMENT:**

Disorder of breast, unspecified, N649 - Current

**PLAN:****New Medication Orders:**

Rx#	Medication	Order Date	Prescriber Order
	risperiDONE Oral Tablet	04/01/2019 10:57	Orally(1) 1 mg - daily x 7 day(s) Pill Line Only -- *** (2) 0.5 mg - daily x 7 day(s) Pill Line Only -- *** (3) 0.5 mg every other day x 7 day(s) Pill Line Only -- *** (4) 0.5 mg Two times a week x 7 day(s) Pill Line Only -- *** (5) 0.5 mg Weekly x 7 day(s) Pill Line Only -- Then stop

Indication: Unspecified mood [affective] disorder

**Discontinued Medication Orders:**

Rx#	Medication	Order Date	Prescriber Order
78826-ALI	risperiDONE 1 MG Tab	04/01/2019 10:57	***crush/empty*** Take one tablet (1 MG) by mouth twice daily [NEEDS CONSENT] ***pill line***

Discontinue Type: When Pharmacy Processes

Discontinue Reason: Not Indicated

Indication:



Inmate Name: BROWN, AMIE M  
 Date of Birth: 06/06/1970  
 Encounter Date: 04/01/2019 10:57

Sex: F Race: WHITE  
 Provider: Williamson, Jim CRNP

Reg #: 71676-019  
 Facility: ALI  
 Unit: C02

#### New Consultation Requests:

<u>Consultation/Procedure</u>	<u>Target Date</u>	<u>Scheduled Target Date</u>	<u>Priority</u>	<u>Translator</u>	<u>Language</u>
Specialty Procedure - In house	05/01/2019	05/01/2019	Routine	No	English

#### Subtype:

In house

#### Reason for Request:

C/O burning/pain under left nipple x1 month. Please evaluate left nipple area with left breast ultrasound

#### Disposition:

Follow-up at Sick Call as Needed

#### Patient Education Topics:

<u>Date Initiated</u>	<u>Format</u>	<u>Handout/Topic</u>	<u>Provider</u>	<u>Outcome</u>
04/02/2019	Counseling	Plan of Care	Williamson, Jim	Verbalizes Understanding

Copay Required: No

Cosign Required: Yes

Telephone/Verbal Order: No

Completed by Williamson, Jim CRNP on 04/02/2019 12:04

Requested to be cosigned by Ortiz, Angel MD/SERO Medical Director.

Cosign documentation will be displayed on the following page.



## SOUND DIAGNOSITCS OF NORTHWEST FLORIDA

**RADIOLOGIST:**  
**JOHN C. TOMBERLIN, M.D.**

### ULTRASOUND REPORT

<b>NAME</b>	<b>BROWN, AMIE M</b>	<b>ALICEVILLE FCI</b>
<b>DR</b>	<b>HORTON, SHANQUAIL</b>	
<b>SEX</b>	<b>F</b>	
<b>AGE</b>	<b>06-06-70</b>	
<b>ID</b>	<b>71676-019</b>	
<b>DATE</b>	<b>12-18-19</b>	

RIGHT BREAST ULTRASOUND: THERE IS HISTORY OF A PALPABLE ABNORMALITY AT THE 6:00 O'CLOCK POSITION. A 2 CM IRREGULAR SLIGHTLY HYPOECHOIC HETEROGENEOUS NODULE IS PRESENT. THERE IS INCREASE IN VASCULARITY. THE APPEARANCE IS CONSIDERED TO BE VERY SUSPICIOUS. A 6 MM SOLID NODULE IS NOTED NEAR THE 9:00 O'CLOCK POSITION ALONG WITH ADDITIONAL SUB-CEMENTER NODULES IN THE REGION. A 2.3 CM LYMPH NODE IS NOTED IN THE AXILLA. ADDITIONAL PROMINENT HETEROGENEOUS LYMPH NODES ARE ALSO NOTED.

OPINION: SUSPICIOUS 2 CM NODULE/MASS AT THE 6:00 O'CLOCK POSITION WITH SUSPECTED ADENOPATHY. CORRELATION WITH MAMMOGRAPHIC FINDINGS IS SUGGESTED. A BIOPSY IS THOUGHT TO BE INDICATED.



JCT/KA

D: 12-21-19

T: 12-23-19



**Bureau of Prisons  
Health Services  
Clinical Encounter**

Inmate Name: BROWN, AMIE M  
Date of Birth: 06/06/1970  
Encounter Date: 01/02/2020 08:41

Sex: F Race: WHITE  
Provider: Li, Xinyu MD/CD

Reg #: 71676-019  
Facility: ALI  
Unit: C02

Chronic Care - Chronic Care Clinic encounter performed at Health Services.

**SUBJECTIVE:**

**COMPLAINT 1**      **Provider:** Li, Xinyu MD/CD

**Chief Complaint:** Chronic Care Clinic

**Subjective:** 49 Y/O F  
HERE FOR CCC

MENTAL HEALTH

ANXIETY

BUSPAR NOT WORKING WELL, NEED TO GO UP ON DOSE  
WILL CONTINUE CYMBALTA, ALSO FOR BACK PAIN

BACK PAIN

L4/L5 HERNIATION

WILL RESTART IBUPROFEN  
CYMBALTA ALSO HELP SOME

IRREGULAR VAGINAL BLEEDING  
DEPO SHOT HELPS

CHRONIC DIARRHEA

WAS DX OF IBS

WILL GIVE ONE WEEK OF IMODIUM  
NO WEIGHT LOSS

REPORTING OF N/V FOR 2 WKS  
MOSTLY IN THE NIGHT  
WILL GIVE WEDGE FOR SUPPORT

MILD ANEMIA PER LAB

WILL GIVE IRON

**Pain:** Not Applicable

**Seen for clinic(s):** Gastrointestinal, Mental Health, OB GYN, Orthopedic/Rheumatology, General

**Added to clinic(s):** OB GYN, Orthopedic/Rheumatology, General

**Removed from clinic(s):** Gastrointestinal

**OBJECTIVE:**

**Temperature:**

<u>Date</u>	<u>Time</u>	<u>Fahrenheit</u>	<u>Celsius</u>	<u>Location</u>	<u>Provider</u>
01/02/2020	08:35 ALI	97.6	36.4		Barry, Shevone MA

**Pulse:**

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Location</u>	<u>Rhythm</u>	<u>Provider</u>
01/02/2020	08:35 ALI	108			Barry, Shevone MA

**Respirations:**

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Provider</u>
01/02/2020	08:35 ALI	18	Barry, Shevone MA



Inmate Name: BROWN, AMIE M  
 Date of Birth: 06/06/1970  
 Encounter Date: 01/02/2020 08:41

Sex: F Race: WHITE  
 Provider: Li, Xinyu MD/CD

Reg #: 71676-019  
 Facility: ALI  
 Unit: C02

**Date Time Rate Per Minute Provider**

**Blood Pressure:**

Date	Time	Value	Location	Position	Cuff Size	Provider
01/02/2020	08:35 ALI	136/93	Left Arm	Sitting	Adult-regular	Barry, Shevone MA

**SaO2:**

Date	Time	Value(%)	Air	Provider
01/02/2020	08:35 ALI	99		Barry, Shevone MA

**Weight:**

Date	Time	Lbs	Kg	Waist Circum.	Provider
01/02/2020	08:35 ALI	176.0	79.8		Barry, Shevone MA

**Exam Comments**

General: Well developed, well nourished female, Alert and Oriented x 3, no acute distress  
 Pulmonary: Clear to Auscultation, no wheezing, no rales  
 Cardiovascular: Regular Rate and Rhythm (RRR), Normal S1 and S2, no M/R/G  
 Abdomen: Normal BS, non-tender, no mass  
 Back: mild tender with palpation, bil knee reflex 2+, straight leg neg  
 Mental Health:  
 Grooming/Hygiene: Normal Grooming  
 Affect: Appropriate  
 Speech/Language: Normal Rate, Normal Articulation  
 Mood: Appropriate  
 Thought Process: Goal Directed  
 Orientation: A and O x 3  
 Pelvic: not examined

**ASSESSMENT:**

Abnormal uterine and vaginal bleeding, unspecified, N939 - Current  
 Anemia, unspecified, D649 - Current  
 Irritable bowel syndrome, K589 - Current  
 Low back pain, M545 - Current  
 Nausea, R110 - Current  
 Unspecified mood [affective] disorder, F39 - Current

**PLAN:**

**New Medication Orders:**

Rx#	Medication	Order Date	Prescriber Order
	busPIRone Tablet	01/02/2020 08:41	15MG Orally - Two Times a Day x 180 day(s)
	Indication: Unspecified mood [affective] disorder		
	Ferrous Gluconate Tablet	01/02/2020 08:41	324 MG Orally - daily x 365 day(s)
	Indication: Anemia, unspecified		
	Loperamide Capsule/Tablet	01/02/2020 08:41	2MG Orally - Two Times a Day PRN x 7 day(s) -- DISPENSE 14 TABS
	Indication: Irritable bowel syndrome		

**Renew Medication Orders:**

Rx#	Medication	Order Date	Prescriber Order
-----	------------	------------	------------------



Inmate Name: BROWN, AMIE M  
 Date of Birth: 06/06/1970  
 Encounter Date: 01/02/2020 08:41

Sex: F Race: WHITE  
 Provider: Li, Xinyu MD/CD

Reg #: 71676-019  
 Facility: ALI  
 Unit: C02

**Renew Medication Orders:**

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
91366-ALI	DULoxetine HCl Delayed Rel 30 MG Cap	01/02/2020 08:41	Take one capsule (30 MG) by mouth twice daily *consent form on file * x 180 day(s)
<b>Indication:</b> Unspecified mood [affective] disorder, Low back pain			
91367-ALI	medroxyPROGESTERone 150MG/ML, 1ML INJ	01/02/2020 08:41	Inject 1 ml Intra-Muscularly every 3 months on THURSDAY x 365 day(s) Pill Line Only
<b>Indication:</b> Abnormal uterine and vaginal bleeding, unspecified, Unspecified menopausal and perimenopausal disorder			
93378-ALI	Ibuprofen 800 MG Tab	01/02/2020 08:41	Take one tablet (800 MG) by mouth twice daily as needed for pain for 14 days *Please purchase from commissary when these are gone if needed* x 180 day(s)
<b>Indication:</b> Low back pain			

**Discontinued Medication Orders:**

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
91365-ALI	busPIRone 10 MG TAB	01/02/2020 08:41	Take one tablet (10 MG) by mouth twice daily *consent form on file *
<b>Discontinue Type:</b> When Pharmacy Processes			
<b>Discontinue Reason:</b> new order written			
<b>Indication:</b>			

**New Laboratory Requests:**

<u>Details</u>	<u>Frequency</u>	<u>Due Date</u>	<u>Priority</u>
Lab Tests - Short List-General-CBC w/diff	One Time	06/01/2020 00:00	Routine
Lab Tests - Short List-General-Comprehensive Metabolic Profile (CMP)			

**New Consultation Requests:**

<u>Consultation/Procedure</u>	<u>Target Date</u>	<u>Scheduled Target Date</u>	<u>Priority</u>	<u>Translator</u>	<u>Language</u>
General Surgery	02/07/2020	02/07/2020	Routine	No	
<b>Subtype:</b>					
— Biopsy, Breast					
<b>Reason for Request:</b>					
— 2 cm Breast nodule on R breast per u/s, recommended FNA					

**Schedule:**

<u>Activity</u>	<u>Date Scheduled</u>	<u>Scheduled Provider</u>
Chronic Care Visit	07/02/2020 00:00	MLP 01
Chronic Care Visit	01/01/2021 00:00	Physician

**Disposition:**

Follow-up at Sick Call as Needed  
 Will Be Placed on Callout

**Patient Education Topics:**

<u>Date Initiated</u>	<u>Format</u>	<u>Handout/Topic</u>	<u>Provider</u>	<u>Outcome</u>
01/02/2020	Counseling	Plan of Care	Li, Xinyu	Verbalizes Understanding



Inmate Name: BROWN, AMIE M  
Date of Birth: 06/06/1970  
Encounter Date: 01/02/2020 08:41

Sex: F Race: WHITE  
Provider: Li, Xinyu MD/CD

Reg #: 71676-019  
Facility: ALI  
Unit: C02

<u>Date Initiated</u>	<u>Format</u>	<u>Handout/Topic</u>	<u>Provider</u>	<u>Outcome</u>
<b>Copay Required:</b> No				
<b>Cosign Required:</b> No				
<b>Telephone/Verbal Order:</b> No				
Completed by Li, Xinyu MD/CD on 01/02/2020 09:19				



Jan. 13, 2020 7:14 PM

Report for Patient "Brown, Amie"

EX. 7  
No. 5001 P. 2

## PCMC - Radiology Report

71676-019

FCI Aliceville

PICKENS COUNTY MEDICAL CENTER  
241 ROBERT K WILSON DRIVE  
CARROLLTON, AL 35447RE: Brown, Amie  
FILE #: R000080258  
DOB: 06/06/197001/13/2020 Diagnostic Mamm Bilat CAD.  
US Breast Limited Right

EXAMINATION: Diagnostic Mamm Bilat CAD and targeted right breast ultrasound

CLINICAL: Palpable abnormality right breast.

Patient reports palpable abnormality within the right breast for two months. This is the patient's baseline mammogram. Positive family history breast cancer in mother, sister and grandmother.

Breasts are comprised of heterogeneously dense, diffusely history fibroglandular tissue.

Area of palpable concern to the patient correlates to an a lobulated 2.5 cm asymmetric density within the middle third of the lower aspect of the right breast.

Remainder of the breast parenchyma demonstrates no masses, architectural distortion or suspicious microcalcifications to suggest malignancy mammographically.

Targeted right breast ultrasound was performed for further evaluation at the site of the palpable abnormality.

At the 06:00 position 4 cm from the nipple a 1.4 x 1.3 x 1.9 cm irregular spiculated appearing solid lesion is seen with posterior shadowing and some associated flow on color Doppler. This correlates to the mammographic abnormality. Mammographic and sonographic appearance is highly suggestive of malignancy. Biopsy is recommended for further evaluation.

## Impression:

Area of palpable concern to the patient correlates to a 1.9 cm irregular nodule mammographic and sonographically having features highly suggestive of malignancy. Biopsy is recommended for further evaluation.

BIRADS 5 - findings suggestive of malignancy.

ASSESSMENT: BIRADS 5 - HIGHLY SUGGESTIVE OF MALIGNANCY

The patient will be notified of the need for followup with their referring physician.

BREAST DENSITY: Heterogeneously dense  
Technologists: 54134122F: SJW:md  
DD: 01/13/2020 04:27 pm  
DT: 01/13/2020 04:27 pm

\*\*\* THIS IS AN ELECTRONICALLY VERIFIED REPORT \*\*\*

1/13/2020 4:27 PM: Samuel J Waits, MD

Age:49 Sex:F Ref Dr:1285664613, ANGEL ORTIZ Order:20004331 Exam:76642 US Breast Limited R1  
ght Account:OP000006012



Jan. 14. 2020. 8:46AM  
Report Patient: Brown, Amie

No. 5009&gt;agrP. 2f2

EX 7(a)

FCI Aliceville

71676-019

**PCMC - Radiology Report**

PICKENS COUNTY MEDICAL CENTER  
241 ROBERT K WILSON DRIVE  
CARROLLTON, AL 35447

RE: Brown, Amie  
FILE #: H000080258  
DOB: 06/06/1970

01/13/2020 Diagnostic Mamm Bilat CAD.  
US Breast Limited Right

EXAMINATION: Diagnostic Mamm Bilat CAD and targeted right breast ultrasound

CLINICAL: Palpable abnormality right breast.

Patient reports palpable abnormality within the right breast for two months. This is the patient's baseline mammogram. Positive family history breast cancer in mother, sister and grandmother.

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Remainder of the breast parenchyma demonstrates no masses, architectural distortion or suspicious microcalcifications to suggest malignancy mammographically.

Targeted right breast ultrasound was performed for further evaluation at the site of the palpable abnormality.

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**Impression:**

Area of palpable concern to the patient correlates to a 1.9 cm irregular nodule mammographic and sonographically having features highly suggestive of malignancy. Biopsy is recommended for further evaluation.

BIRADS 5 - findings suggestive of malignancy.

ASSESSMENT: BIRADS 5 - HIGHLY SUGGESTIVE OF MALIGNANCY

The patient will be notified of the need for followup with their referring physician.

BREAST DENSITY: Heterogeneously dense  
Technologists: 541341

22F: SJW:rd  
DD: 01/13/2020 04:27 pm  
DT: 01/13/2020 04:27 pm

\*\*\* THIS IS AN ELECTRONICALLY VERIFIED REPORT \*\*\*

1/13/2020 4:27 PM: Samuel J Waits, MD

Age:49 Sex:F Ref Dr:1285664813, ANGEL ORTIZ Order:20004321 Exam:77066 Diagnostic Mamm Bilat CAD. Account:0F000006012  
B5



02/18/2020 TUE 13:55 FAX 205 759 2868 University Surgical

EX. 8  
002/015



University Surgical Associates, P.C.

701 University Boulevard East  
DCH Medical Tower, Suite 606  
Tuscaloosa, AL 35401  
Tel. 205-752-2501  
Fax 205-759-2868

Dr. Grayson Menard

2/18/2020

Dear Becky,

As per our discussion, Dr. Menard reviewed pts pathology report of biopsy/FNA and gave instructions that patient, Amie Brown (DOB 6/6/1970), needs to see Oncology (ASAP). I have attached his office visit note/order as well as pathology results. Also, Dr. Menard wants to see patient back in his office to discuss results with her. If you have any questions, please feel free to call me.

Thanks,

*Amanda Pike, RN*

University Surgical Associates P.C.

Grayson Menard, MD

701 University Blvd. E. Suite 606

Tuscaloosa, AL 35401


Phone: 205-752-2501, Fax: 205-759-2868




EX-8 (a)

02/18/2020 TUE 13:55 FAX 205 759 2868 University Surgical

0003/015



**UNIVERSITY SURGICAL ASSOCIATES, P.C.**  
 701 UNIVERSITY BOULEVARD EAST • DCH Medical Tower, Suite 606  
 TUSCALOOSA, AL 35401 • Phone: (205) 752-2501 • Fax: (205) 759-2868



BRADLEY D. NELSON, M.D., FACS  
DFA: BUS 002811  
MD01090

D. CHARLES OCKEN, M.D., FACS  
DFA: A6210914  
MD10914

CHRISTOPHER L. MARTIN, M.D., FACS  
DFA: F0100122  
MD10011

RAYSON W. MENARD, M.D.  
DFA: F0012141  
MD10141

For: Annie Brown Date: 2/18/2020  
 Address: DOB-6/6/1970

Rx

Order

*Pt needs URGENT Referral  
to ONCOLOGY*

*Sharon Menard* M.D.  
DISPENSE AS WRITTEN

pm re-☐ fill  
DO NOT REFILL ☒  
REFILL \_\_\_\_\_ TIMES

PRODUCT SELECTION PERMITTED M.D.



EX. 8(b)

2004/015

02/18/2020 TUE 13:56 FAX 205 759 2868 University Surgical

Brown, Amie Tillet-D19

FCL Aliceville

RIN DATE 02/18/20

DCH HEALTH SYSTEM LABORATORIES

RUN TIME: 1104

DCH Regional Medical Center  
809 University Blvd. E.  
Tuscaloosa, AL 35401

Northport Medical Center  
2700 Hospital Drive  
Northport, AL 35476

Fayette Medical Center  
1653 Temple Ave N  
Fayette, AL 35555

Name: BROWN, AMIE

Acct#: D095181970

Loc: OPC.US

Unit#: M003152708

Age/Sex: 49/F

Room/Bed:

Att Dr: MENARD, GRAYSON MD

Status: REG CLI

Reg: 02/13/20

Dis:

Spec #: 20:SF1398

Received: 02/14/20-0647

Status: SOUT

Req#: 27949565

Spec Type: SURGICAL

Subm Dr: MENARD, GRAYSON, MD

## DIAGNOSIS

Breast, right, ultrasound-guided mammotome biopsy:

- Infiltrating ductal carcinoma, Nottingham grade 3 (tubules 3, nuclei 2, mitoses 3), extensively involving all four cores and measuring up to 1.0 cm in greatest linear dimension.
- Lymphovascular invasion identified.

Comment: See also concurrent positive axillary FNA (20:FN110).

This case has been seen in intradepartmental consultation

## TUMOR MARKERS- INVASIVE

Estrogen Receptor: WEAKLY POSITIVE  
(1-2% of tumor cells with WEAK  
nuclear staining)

Progesterone receptor: WEAKLY POSITIVE  
(1 % of tumor cells with WEAK  
nuclear staining)

Ki67: ELEVATED  
(30 % of tumor cells with STRONG  
nuclear staining)

Comment: Immunohistochemical evaluation performed by semiquantitative manual technique.  
All controls show appropriate reactivity

HER-2 by FISH. To be performed by Integrated Oncology and reported as an addendum.

ER (Estrogen Receptor) specifications:  
Specimen type: Formalin fixed paraffin-embedded  
Clone: SP1-ER  
Detection system: UltraView DAB Detection Kit (Ventana)

PR (Progesterone Receptor) specifications



02/18/2020 TUE 13:56 FAX 205 759 2868 University Surgical

0005/015

RUN DATE 02/18/20

DCH HEALTH SYSTEM LABORATORIES

RUN TIME. 1104

DCH Regional Medical Center  
809 University Blvd. E.  
Tuscaloosa, AL 35401

Northport Medical Center  
2700 Hospital Drive  
Northport, AL 35476

Fayette Medical Center  
1653 Temple Ave N  
Fayette, AL 35555

SPEC #: 20:SP1398

PATIENT: BROWN, AMIE

#D095181970

(Continued)

## TUMOR MARKERS- INVASIVE (Continued)

Specimen type Formalin fixed paraffin-embedded

Clone: 1E2-PR

Detection system: Ultraview DAS Detection Kit (Ventana)

Entered: 02-17-20 - 17:17 LB MASU

## MICROSCOPIC DESCRIPTION

A microscopic examination has been performed.

## SPECIMEN ID

FEMALE BREAST, RIGHT - MASS

## CLINICAL HISTORY

Right breast mass. /pas

## GROSS DESCRIPTION

The specimen is received in a single container of formalin labeled "Amie Brown" and "right breast" received are four cores measuring up to 2.0 cm in length and 0.3 cm in diameter, entirely submitted in a single cassette. Dx/pas

Final: MARTIN, SUZANNE, MD

02-14-20

&lt;02-14-20-1529&gt; by LB.MASU

\*\* END OF REPORT \*\*



02/18/2020 TUE 13:56 FAX 205 759 2868 University Surgical

0006/015

Brown, Amie

FCI Aliceville

71676-019

DCH REGIONAL MEDICAL CENTER LABORATORY  
 809 UNIVERSITY BLVD. E TUSCALOOSA, ALABAMA 35401  
 PHONE: (205) 759-7484  
 DIRECTOR: STEPHENIE DILLARD, M.D., FCAP

RUN DATE: 02/15/20  
 RUN TIME: 0915

## DCH CYTOPATHOLOGY REPORT - PHYSICIAN COPY

Name: BROWN, AMIE	Age/Sex: 49/F	Status: REG CLI	Reg: 02/13/20
Acct#: D095181970	Unit#: M003152708	Location: OPC, US	Dis:
Address/Phone: PO BOX 445, ALICEVILLE, AL 35442 205 373-5000			
CHART #:		Attend Dr: MENARD, GRAYSON, MD	

Spec #: 20:FN110	Collected: 02/13/20	Received: 02/13/20-1700	Status: SOUT
	Subm Dr: MENARD, GRAYSON, MD	Other Dr:	

## DIAGNOSIS

Axilla, right, FNA, slides/thin prep/cell block: Positive for malignant cells.

Metastatic carcinoma, compatible with breast primary (the tumor is fragmented and an accurate measurement cannot be obtained; see also concurrent breast biopsy case 20:SP1398)

This case has been seen in intradepartmental consultation.

## PROCEDURE NOTE

PROCEDURE PERFORMED BY: DR. GRAYSON MENARD

## SPECIMEN ID

AXILLA, NOS - RIGHT FNA: REC'D SPECIMEN W/FIXATIVE AND 4 SLDS TOT 5 SLDS CB

## CLINICAL HISTORY

NO HISTORY SUBMITTED WITH SPECIMEN

## CYTOTECHNOLOGIST

Todd Zizzi, CT(ASCP) DCH RMC

Final: MARTIN, SUZANNE, MD \* 02/14/20 <02/14/20-1528> by LB.MASTI



02/18/2020 TUE 13:56 FAX 205 759 2868 University Surgical

0007/015

FCI Alcoville

DCH Regional Medical Center  
809 University Blvd E  
Tuscaloosa, AL 35404

*Brown Amie 71676-019* Operative Report

PATIENT: BROWN, AMIE  
ACCOUNT #: D095101970

MR #: M003152798

ADMITTING PHYSICIAN: MENARD, GRAYSON, MD

AUTHENTICATING PHYSICIAN: MENARD, GRAYSON, MD

CMDOC: OPRECORD 0213-1375

ROOM:

REG DATE: 02/13/20

DOB: 06/06/70 AGE: 49

REPORT DATE/TIME: 02/13/20 0000

## PRE-OPERATIVE DIAGNOSES:

Right breast mass

## POST-OPERATIVE DIAGNOSES:

Right breast mass

## PROCEDURES PERFORMED:

Ultrasound guided right breast mammotome biopsy of 6 o'clock mass. FNA right axillary lymph node

## ASSISTANTS:

Beth Byars, MS3

## ESTIMATED BLOOD LOSS:

&lt; 10 ml.

## FINDINGS:

Multiple mammotome core biopsies from the right breast lesion at the 6 o'clock position. Multiple passes with a 23 gauge needle for FNA of the right axillary lymph node.

## SPECIMEN REMOVED

Multiple mammotome core biopsies from right breast mass. Right lymph node FNA

## COMPLICATIONS:

No complications were noted

## ANESTHESIA:

Local

## IMPLANTS:



02/18/2020 TUE 13:57 FAX 205 759 2868 University Surgical

0008/015

## Operative Report

PATIENT: BROWN, AMIE	CMDOC: OPRECORD 0213-1375
ACCOUNT #: D095181970	ROOM
MR #: M003152708	REG DATE 02/13/20
ADMITTING PHYSICIAN: MENARD, GRAYSON, MD.	DOR 05 05 70 AGE 49
AUTHENTICATING PHYSICIAN: MENARD, GRAYSON, MD	REPORT DATE/TIME: 02/13/20 0000

None

## INDICATIONS:

Mrs. Brown is a 49 year old female who presented to clinic with a palpable right breast mass. She first noticed right axillary pain last October. She reports an enlarging right breast mass and worsening symptoms since. Examination demonstrated a palpable breast mass and right axillary lymphadenopathy. I discussed the risks, benefits, alternatives, patient's goals, and potential problems with right breast ultrasound guided mammotome biopsy and right axillary lymph node FNA with Mrs. Brown and she wished to proceed.

## TECHNIQUE:

The patient was taken to the imaging suite and the right breast lesion at the 6 o'clock position was localized on ultrasound. The right breast was prepped and draped in a sterile fashion. A timeout was performed and the right breast was localized with lidocaine. Additional local was infiltrated underneath the lesion. An incision was made in the right breast for the mammotome biopsy device. The device was advanced underneath the lesion and several biopsies were obtained anteriorly. A clip was then advanced through the mammotome device into the biopsy area. Ultrasound after the procedure showed the clip was in appropriate position. The incision was closed with a 4-0 nylon suture. Dermabond was placed over the incision site. An ultrasound was then performed of the right axilla. There was a large lymph node noted. The skin at the site was localized with lidocaine. A 23 gauge needle was then advanced into the lymph node and FNA biopsies were taken. This was repeated multiple times. Five slides were created and an additional biopsy was sent for cytology. A bandaid was placed over the needle site. The patient tolerated the procedure well.

## DISPOSITION:

The patient tolerated the procedure well and was transferred to recovery.

Electronically signed by Grayson Menard on 02-14-2020 13:12 CST.

WWW6322931.0 by Grayson Menard, 02-14-2020 13:12 CST (Approved)

Created in Vinci1.



02/18/2020 TUE 13:57 FAX 205 759 2868 University Surgical

EX. 8(9) 0009/015

FCL Aliceville

# DCH REGIONAL MEDICAL CENTER Department of Imaging Services

300 University Boulevard East • Tuscaloosa, Alabama 35401 • Phone: (205) 759-7338 • Fax: (205) 343-8113

Date of Birth 06/06/1970	AMIE BROWN <i>File 116-019</i>			Age 49	Sex F
Location OPC-US	Medical Record Number M003152708	Account Number D095181970	Room		

Procedure Date  
02/13/2020Ordering Physician  
Grayson MenardProcedure Description  
006046122 • US Bilateral Breasts (Complete)

## URGENT REPORT

### QA: AWAITING DOCUMENTATION

AVAILABLE CLINICAL INFORMATION: Right breast biopsy with palpable abnormality with bilateral palpable abnormalities.

EXAMINATION: US Bilateral Breasts (Complete)

COMPARISON: None available

FINDINGS: All four quadrants and the retroareolar region of the left breast were imaged. No sonographic abnormality.

All four quadrants and the retroareolar region the right breast were imaged. At the 06:00 position, 6 cm from the nipples a 2.7 x 1.4 x 2.1 cm solid mass with irregular margins and internal flow. This is compatible with malignancy. There is a mammatome clip at this region.

Extending from the 10-11 o'clock position from 5 cm from the nipple to the nipple or multiple mass-like areas which are solid hypoechoic the largest area measures approximately 4.0 x 1.1 x 3.2 cm with internal flow this is felt to reflect extensive neoplasia. There is some skin thickening noted extending from the 03:00 to 06:00 position. There is an abnormal appearing lymph node within the axillary tail measuring 1.0 x 0.8 x 0.7 cm. There is a large abnormal lymph node within the right axilla measuring 4.2 x 2.6 x 3.4 cm which was biopsied.

CONCLUSION: Extensive neoplastic disease within the right breast felt to be present



02/18/2020 TUE 13:58 FAX 205 759 2868 University Surgical

0010/015

Date of Birth 02/18/1920		AMIE BROWN		Age 49	Sex F
Location CPC.US	Medical Record Number M003152708	Account Number D095181970	Room		

APPROXIMATELY 10% OF COLON COC'S - HIGHLY SUGGESTIVE OF MALIGNANCY  
 The patient is advised to see their physician with their primary physician.

220.DAS-mid.mids 3606642  
 DT: DT: 02/13/2020 14:04  
 DT: 02/13/2020 14:05  
 DT: 02/13/2020 14:05  
 DT: DT: 02/13/2020 14:05

David A Smith, MD

Technology: MDC



02/18/2020 TUE 13:58 FAX 205 759 2868 University Surgical

0011/015

DOH REGIONAL MEDICAL CENTER  
 Department of Imaging Services  
 809 University Boulevard East  
 Tuscaloosa, Alabama 35401

PATIENT: BROWN, AMIE  
 ACCOUNT #: 0095181970  
 MR #: M003152708  
 PHYSICIAN: GRAYSON MENARD, MD

ROOM #: OPC.US  
 EXAM DATE: 02/13/2020  
 DATE OF BIRTH: 06/06/1970

EXAM#	CPT CODE	CAMPUS/TYPE/EXAM
006646122	76041-50	OPC/US/US Breast Complete Bilat

AVAILABLE CLINICAL INFORMATION: Right breast biopsy with palpable abnormality with bilateral palpable abnormalities.

EXAMINATION: US Bilateral Breasts (Complete)

COMPARISON: None available

FINDINGS: All four quadrants and the retroareolar region of the left breast were imaged. No sonographic abnormality.

All four quadrants and the retroareolar region the right breast were imaged. At the 06:00 position, 6 cm from the nipples a 2.7 x 1.4 x 2.1 cm solid mass with irregular margins and internal flow. This is compatible with malignancy. There is a mammotome clip at this region.

Extending from the 10-11 o'clock position from 5 cm from the nipple to the nipple or multiple mass-like areas which are solid hypoechoic the largest area measures approximately 4.0 x 1.1 x 3.2 cm with internal flow this is felt to reflect extensive neoplasm. There is some skin thickening noted extending from the 03:00 to 06:00 position. There is an abnormal appearing lymph node within the axillary tail measuring 1.0 x 0.8 x 0.7 cm. There is a large abnormal lymph node within the right axilla measuring 4.2 x 2.6 x 3.4 cm which was biopsied.

CONCLUSION: Extensive neoplastic disease within the right breast felt to be present

ASSESSMENT: BIRADS CODE 5 - HIGHLY SUGGESTIVE OF MALIGNANCY  
 The patient will be notified of the need for followup with their referring physician.

22D:DAS:md.smida 3606642  
 DD: DD: 02/13/2020 14:04  
 DE: 02/13/2020 14:05  
 DP: 02/13/2020 13:03  
 DT: DT: 02/13/2020 14:05

David A Smith, MD



Ex. 8 (J)

02/18/2020 TUE 13:58 FAX 205 759 2868 University Surgical

012/015

FCI Aliceville

**University Surgical Associates, P.C.**701 University Blvd East Suite 606 Tuscaloosa, AL 35401-7411  
(205) 752-2501 Fax: (205) 759-2868

February 18, 2020

Page 1

Office Visit

**Amie Brown** 71676-019

Female DOB: 06/06/1970

33847

Home: (205) 373-5000

Ins: Seven Corners

02/05/2020 - Office Visit: Office Visit -Right Breast Mass

Provider: Grayson W Menard MD

Location of Care: University Surgical Associates, P.C.

Visit Type: Consultation/History &amp; Physical

Referring Provider: Dr. Li

Primary Provider: Dr. Li

CC: Right Breast Mass.

**History of Present Illness:**

Mrs. Brown is a 49 year old female who presents with a palpable right breast mass. She reports she first noticed the mass in October of last year. She developed right arm tenderness in the axilla. She is currently incarcerated and saw the physician at the jail. Examination at that time demonstrated the right breast mass. She has since had a mammogram and ultrasound. The mammogram demonstrates a lobulated 2.5 cm mass in the right breast. The ultrasound showed a 1.4 x 1.3 x 1.9 cm spiculated solid lesion with posterior shadowing in the right breast (Birads 5). She reports a significant family history of breast cancer. Her sister, mother, grandmother, cousin, and two maternal aunts have all been diagnosed with breast cancer. She denies any family history of ovarian cancer. She is unsure if any family members have had genetic testing.

**Past Medical History**

Anxiety

Depression

IBS

Hx of Anemia

Plantar Fasciitis

Low Back Pain

**Past Surgical History**

Gallbladder Surgery

Tubal Ligation

Right Salpingectomy

**Social History**

Smoking Status- Former smoker

Alcohol Use- no

Drug Use- no

**Review of System**

General- Complains of Loss of Appetite

Endocrine- Complains of None

Cardiovascular- Complains of Chest Pain

Hematologic- Complains of Enlarged Lymph Nodes

Gastrointestinal- Complains of Diarrhea, Indigestion / Heartburn

Genitourinary- Complains of None

Mental Health- Complains of Anxiety Depression



Ex 8 (K)

02/18/2020 TUE 13:59 FAX 205 759 2868 University Surgical

2013/015

University Surgical As. States, P.C.  
 701 University Blvd East Suite 606 Tuscaloosa, AL 35401-7411  
 (205) 752-2501 Fax: (205) 759-2868

February 18, 2020  
 Page 2  
 Office Visit

Amie Brown  
 Female DOB: 06/06/1970 33847 Home: (205) 373-5000  
 Ins: Seven Corners

Musculoskeletal- Complaints of Back pain  
 Neurologic- Complaints of Frequent headaches Difficulty sleeping / insomnia  
 Respiratory- Complaints of Shortness of breath  
 Skin- Complaints of Lump in right breast, Nipple discharge, Breast pain

### Vital Signs:

Patient Profile: 49 Years Old Female  
 Height: 61 inches  
 Pulse rate: 97 / minute  
 BP sitting: 152 / 100

Vitals Entered By: Amanda Pike RN (February 18, 2020 11:15 AM)

### Active Medications (reviewed today):

MEDROXYPROGESTERONE ACETATE 150 MG/ML INTRAMUSCULAR SUSPENSION  
 (MEDROXYPROGESTERONE ACETATE) Inject 1 ml IM every 3 month on Thursday  
 IBUPROFEN 800 MG ORAL TABLET (IBUPROFEN) take one tablet by mouth twice daily as needed for  
 pain for 14 days  
 FERROUS GLUCONATE 324 (38 FE) MG ORAL TABLET (FERROUS GLUCONATE) take one tablet by  
 mouth each day  
 DULOXETINE HCL 30 MG ORAL CAPSULE DELAYED RELEASE PARTICLES (DULOXETINE HCL)  
 take one capsule by mouth twice daily  
 BUSPIRONE HCL 15 MG ORAL TABLET (BUSPIRONE HCL) take one tablet by mouth twice daily

### Current Allergies (reviewed today):

PENICILLIN (Critical)  
 LEVAQUIN (Critical)  
 DILAUDID (Critical)  
 CIPROFLOXACIN (Critical)

### Family History Summary:

Family History of Cervical Cancer for Mother - Entered On: 2/18/2020  
 Family History of Breast Cancer for Mother - Entered On: 2/18/2020  
 Family History of Other Medical Problems for Father, COPD - Entered On: 2/18/2020  
 Family History of Hypertension for Father - Entered On: 2/18/2020  
 Family History of High Cholesterol for Father - Entered On: 2/18/2020  
 Family History of Heart Disease for Father - Entered On: 2/18/2020  
 Family History of Diabetes for Father - Entered On: 2/18/2020  
 Family History of Depression for Father - Entered On: 2/18/2020  
 Family History of Other Cancer for Sister - Entered On: 2/18/2020  
 Family History of Other Cancer for Aunt - Entered On: 2/18/2020  
 Family History of Breast Cancer for Maternal Grandmother - Entered On: 2/18/2020  
 Family History of Hypertension for Paternal Grandmother - Entered On: 2/18/2020  
 Family History of High Cholesterol for Paternal Grandmother - Entered On: 2/18/2020  
 Family History of Breast Cancer for Paternal Grandmother - Entered On: 2/18/2020  
 Family History of Hypertension for Paternal Grandfather - Entered On: 2/18/2020  
 Family History of High Cholesterol for Paternal Grandfather - Entered On: 2/18/2020



EX. 8 (L)

02/18/2020 TUE 13:59 FAX 205 759 2868 University Surgical

0014/015

University Surgical As. Jlates, P.C.  
701 University Blvd East Suite 606 Tuscaloosa, AL 35401-7411  
(205) 752-2501 Fax: (205) 759-2868

February 18, 2020  
Page 3  
Office Visit

**Amie Brown**

Female DOB: 06/06/1970

33847

Home: (205) 373-5000

Ins: Seven Corners

Family History of Heart Disease for Paternal Grandfather - Entered On: 2/18/2020  
Family History of Other Cancer for Other - Entered On: 2/18/2020

Family History Reviewed: 02/05/2020

**Risk Factors:**

Smoked Tobacco Use: Former smoker

**Physical Exam****General:**

well developed, well nourished, in no acute distress

**Head:**

normocephalic and atraumatic

**Eyes:**

PERRLA

**Breasts:**

Right breast with palpable 2 x 2 cm mass at the 6 o'clock position. Right palpable axillary lymphadenopathy. No masses or axillary lymphadenopathy on the left.

**Lungs:**

Clear to auscultation bilaterally

**Heart:**

regular rate and rhythm

**Extremities:**

no clubbing, cyanosis, edema

**Neurologic:**

Cranial nerves grossly intact.

**Psych:**

alert and cooperative; normal mood and affect

**Blood Pressure:**

Today's BP: 152/100 mm Hg

**Problem # 1: 49 year old female with right breast mass**

I reviewed the images from the breast ultrasound. I discussed the results of the imaging study and my physical exam with Mrs. Brown. I am concerned for a right breast cancer with metastasis to the right axilla. I recommended obtaining a biopsy of the right breast mass and right axillary lymph nodes. I discussed the risks, benefits, alternatives, patient's goals, and potential problems with right breast ultrasound guided mammotome biopsy and right axillary lymph node FNA with Mrs. Brown. All of her questions were answered. She understands and wishes to proceed. We will schedule the procedure as soon as possible.

**Medications Added to Medication List This Visit:**

- 1) Medroxyprogesterone Acetate 150 Mg/ml Intramuscular Suspension (Medroxyprogesterone acetate)  
... Inject 1 ml im every 3 month on thursday



02/18/2020 TUE 13:59 FAX 205 759 2868 University Surgical

Ex. 8(m)

015/015

University Surgical As. iates, P.C.  
701 University Blvd East Suite 606 Tuscaloosa, AL 35401-7411  
(205) 752-2501 Fax: (205) 759-2868

February 18, 2020

Page 4

Office Visit

**Amie Brown**

Female DOB: 06/06/1970

33847

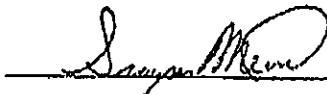
Home: (205) 373-5000

Ins: Seven Corners

- 2) Ibuprofen 800 Mg Oral Tablet (Ibuprofen) .... Take one tablet by mouth twice daily as needed for pain for 14 days
- 3) Ferrous Gluconate 324 (38 Fe) Mg Oral Tablet (Ferrous gluconate) .... Take one tablet by mouth each day
- 4) Duloxetine Hcl 30 Mg Oral Capsule Delayed Release Particles (Duloxetine hcl) .... Take one capsule by mouth twice daily
- 5) Buspirone Hcl 15 Mg Oral Tablet (Buspirone hcl) .... Take one tablet by mouth twice daily

**Patient Instructions:**

- 1) Right Breast U/S Guided Mammotome Biopsy with FNA of Right Axilla Lymph Node scheduled on 2/13/2020 at DCH.





**Bureau of Prisons  
Health Services  
Clinical Encounter**

Inmate Name: BROWN, AMIE M  
Date of Birth: 06/06/1970  
Encounter Date: 02/20/2020 08:13

Sex: F Race: WHITE  
Provider: Williamson, Jim CRNP

Reg #: 71676-019  
Facility: ALI  
Unit: C02

Mid Level Provider - Evaluation encounter performed at Health Services.

**SUBJECTIVE:**

**COMPLAINT 1** Provider: Williamson, Jim CRNP

**Chief Complaint:** Pain

**Subjective:** Intermittent thoracic pain worsening over past two weeks. Describes as sharp/pins-needles and as a "catch" between the shoulder blades. Also with pain under left breast with same character. She denies radiation of pain, denies shortness of breath or cough. Denies nausea/vomiting.

Recent biopsy report discussed, oncology consult pending.

**Pain:** BP uncontrolled  
Yes

**Pain Assessment**

**Date:** 02/20/2020 08:32

**Location:** Back-Upper

**Quality of Pain:** Pins and Needles

**Pain Scale:** 6

**Intervention:** NSAIDs

**Trauma Date/Year:**

**Injury:**

**Mechanism:**

**Onset:** 1-2 Weeks

**Duration:** 1-2 Weeks

**Exacerbating Factors:** sitting up, moving

**Relieving Factors:** rest

**Reason Not Done:**

**Comments:**

**ROS:**

**Cardiovascular**

**General**

No: Angina, Cough, Edema, Exertional dyspnea, Orthopnea

**Pulmonary**

**Respiratory System**

Yes: Within Normal Limits

**Psychiatric**

**General**

Yes: Anxiety-Mild

No: Hallucinations, Suicide/Self-Harm Thoughts, Homicide/Other Harm Thoughts

**OBJECTIVE:**

**Temperature:**



EX-9(a)

Inmate Name: BROWN, AMIE M	Sex: F	Race: WHITE	Reg #: 71676-019
Date of Birth: 06/06/1970	Provider: Williamson, Jim CRNP	Facility: ALI	Unit: C02
Encounter Date: 02/20/2020 08:13			

<u>Date</u>	<u>Time</u>	<u>Fahrenheit</u>	<u>Celsius</u>	<u>Location</u>	<u>Provider</u>
02/20/2020	08:34 ALI	97.6	36.4		Williamson, Jim CRNP

**Pulse:**

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Location</u>	<u>Rhythm</u>	<u>Provider</u>
02/20/2020	08:34 ALI	104			Williamson, Jim CRNP

**Respirations:**

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Provider</u>
02/20/2020	08:34 ALI	16	Williamson, Jim CRNP

**Blood Pressure:**

<u>Date</u>	<u>Time</u>	<u>Value</u>	<u>Location</u>	<u>Position</u>	<u>Cuff Size</u>	<u>Provider</u>
02/20/2020	08:34 ALI	171/92				Williamson, Jim CRNP

**SaO2:**

<u>Date</u>	<u>Time</u>	<u>Value(%)</u>	<u>Air</u>	<u>Provider</u>
02/20/2020	08:34 ALI	98		Williamson, Jim CRNP

**Exam:****General****Affect**

Yes: Pleasant, Cooperative

**Appearance**

Yes: Appears Well

**Skin****General**

Yes: Within Normal Limits, Dry

No: Clammy, Diaphoretic

**Neck****General**

Yes: Within Normal Limits

**Pulmonary****Observation/Inspection**

Yes: Within Normal Limits

**Auscultation**

Yes: Clear to Auscultation

**Cardiovascular****Observation**

Yes: Tachycardia

**Auscultation**

Yes: Normal S1 and S2

**Peripheral Vascular****General**

Yes: Within Normal Limits

**Mental Health****Posture**

Yes: Within Normal Limits



Inmate Name: BROWN, AMIE M  
 Date of Birth: 06/06/1970  
 Encounter Date: 02/20/2020 08:13

Sex: F Race: WHITE  
 Provider: Williamson, Jim CRNP

Reg #: 71676-019  
 Facility: ALI  
 Unit: C02

**Exam:****Grooming/Hygiene**

Yes: Within Normal Limits

**Facial Expressions**

Yes: Within Normal Limits

**Affect**

Yes: Within Normal Limits

**Speech/Language**

Yes: Within Normal Limits

**Mood**

Yes: Within Normal Limits

**Thought Process**

Yes: Within Normal Limits

**Thought Content**

Yes: Within Normal Limits

**Perceptions**

Yes: Within Normal Limits

**Orientation**

Yes: Within Normal Limits

**ASSESSMENT:**

Essential (primary) hypertension, I10 - Current

Pain, unspecified, R52 - Current

Unspecified mood [affective] disorder, F39 - Current

**PLAN:****New Medication Orders:**

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>
	busPIRone Tablet	02/20/2020 08:13
<b><u>Prescriber Order:</u></b>	10mg Orally - Two Times a Day x 180 day(s) -- Take 2 Tabs (20mg) twice daily=total 40mg daily	
	<b>Indication:</b> Unspecified mood [affective] disorder	
	Lisinopril Tablet	02/20/2020 08:13
<b><u>Prescriber Order:</u></b>	20mg Orally - daily x 365 day(s)	
	<b>Indication:</b> Essential (primary) hypertension	
	Ibuprofen Tablet	02/20/2020 08:13
<b><u>Prescriber Order:</u></b>	800mg Orally - three times a day x 180 day(s)	
	<b>Indication:</b> Low back pain	

**Discontinued Medication Orders:**

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>
94850-ALI	medroxyPROGESTERone 150MG/ML, 1ML INJ	02/20/2020 08:13
<b><u>Prescriber Order:</u></b>	Inject 1 ml Intra-Muscularly every 3 months on THURSDAY	
	<b>Discontinue Type:</b> When Pharmacy Processes	
	<b>Discontinue Reason:</b> discontinue	



EX. 9(c)

Inmate Name: BROWN, AMIE M  
 Date of Birth: 06/06/1970  
 Encounter Date: 02/20/2020 08:13

Sex: F Race: WHITE  
 Provider: Williamson, Jim CRNP

Reg #: 71676-019  
 Facility: ALI  
 Unit: C02

**Discontinued Medication Orders:**

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>
94845-ALI	busPIRone 15 MG TAB	02/20/2020 08:13

**Prescriber Order:** Take one tablet (15 MG) by mouth twice daily

**Discontinue Type:** When Pharmacy Processes

**Discontinue Reason:** new order written

**Indication:**

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>
94848-ALI	Ibuprofen 800 MG Tab	02/20/2020 08:13

**Prescriber Order:** Take one tablet (800 MG) by mouth twice daily as needed for pain for 14 days \*Please purchase from commissary when these are gone if needed\*

**Discontinue Type:** When Pharmacy Processes

**Discontinue Reason:** new order written

**Indication:**

**New Non-Medication Orders:**

<u>Order</u>	<u>Frequency</u>	<u>Duration</u>	<u>Details</u>	<u>Ordered By</u>
Blood Pressure	Weekly	30 days		Williamson, Jim CRNP

**Order Date:** 02/20/2020

**Schedule:**

<u>Activity</u>	<u>Date Scheduled</u>	<u>Scheduled Provider</u>
Follow-up F/U BP, oncology consult	03/16/2020 00:00	MLP 01

**Disposition:**

Follow-up at Sick Call as Needed  
 Follow-up at Chronic Care Clinic as Needed

**Other:**

HTN: Lisinopril 20mg daily, weekly BP checks

Pain: ECG sinus Tach, Ibuprofen increase to 800mg TID

Buspar increased to 20mg bid for increased anxiety

**Patient Education Topics:**

<u>Date Initiated</u>	<u>Format</u>	<u>Handout/Topic</u>	<u>Provider</u>	<u>Outcome</u>
02/20/2020	Counseling	Compliance - Treatment	Williamson, Jim	Verbalizes Understanding

**Copay Required:** No

**Cosign Required:** No

**Telephone/Verbal Order:** No

Completed by Williamson, Jim CRNP on 02/20/2020 08:49



*Oncology  
consult*

**Bureau of Prisons  
Health Services  
Consultation Request**

**Inmate Name:** BROWN, AMIE M  
**Date of Birth:** 06/06/1970

**Reg #:** 71676-019 **Complex:** ALI  
**Sex:** F

**Report of Consultation:** Oncology

**Subtype:** Offsite

**Inmate Name:** BROWN, AMIE M  
**Date of Birth:** 06/06/1970  
**Institution:** ALICEVILLE FCI  
11090 HIGHWAY 14  
ALICEVILLE, Alabama 35442  
2053730611

**Reg #:** 71676-019  
**Sex:** F

**Assessment:**

*49 yo female with newly diagnosed breast cancer in right breast  
Seen by Dr. Mamed and underwent surgery that removed portion  
for ductal carcinoma*

**Plan:**

*Recommend follow up with surgeon ASAP for definitive surgery.  
Would also recommend CT scans for staging.*

**Signature**  
**Date**

*[Signature]* 8/4/20

**Completed By:**

Report may be hand-written or (preferably) typed on this form. If dictated on office or hospital letterhead to follow, please indicate essential findings or recommendations to be acted upon pending final report.

Follow-up services and primary responsibility for inmate health care remains with Bureau of Prisons staff. While discussion of diagnostic/treatment options with the inmate may be appropriate, they are subject to review by the inmate's primary care provider, the institution utilization review committee and/or the BOP National Formulary.

Please notify institution prior to scheduling surgery dates or follow-up appointments.

Inmate not to be informed of appointment dates.



**Bureau of Prisons  
Health Services  
Clinical Encounter**

Inmate Name: BROWN, AMIE M  
Date of Birth: 06/06/1970  
Encounter Date: 03/05/2020 08:22

Sex: F Race: WHITE  
Provider: Williamson, Jim CRNP

Reg #: 71676-019  
Facility: ALI  
Unit: C02

Mid Level Provider - Evaluation encounter performed at Health Services.

**SUBJECTIVE:**

**COMPLAINT 1** Provider: Williamson, Jim CRNP

**Chief Complaint:** Pain .

**Subjective:** 49 y/o with sudden onset right lower chest pain radiating around to right back, starting last PM. She states "I can't catch my breath." C/O slight nausea, no vomiting. Right arm swollen with purpuric rash to lower forearm, pain. Describes chest pain as coming in waves, sharp, 10/10. Denies cough, fever, chills.

**Pain:** Not Applicable

**ROS:**

**Cardiovascular**

**General**

No: Cough

**Pulmonary**

**Respiratory System**

Yes: Dyspnea

**Psychiatric**

**General**

Yes: Anxious

**OBJECTIVE:**

**Temperature:**

<u>Date</u>	<u>Time</u>	<u>Fahrenheit</u>	<u>Celsius</u>	<u>Location</u>	<u>Provider</u>
03/05/2020	08:28 ALI	98.4	36.9		Williamson, Jim CRNP

**Pulse:**

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Location</u>	<u>Rhythm</u>	<u>Provider</u>
03/05/2020	08:28 ALI	99			Williamson, Jim CRNP

**Respirations:**

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Provider</u>
03/05/2020	08:28 ALI	20	Williamson, Jim CRNP

**Blood Pressure:**

<u>Date</u>	<u>Time</u>	<u>Value</u>	<u>Location</u>	<u>Position</u>	<u>Cuff Size</u>	<u>Provider</u>
03/05/2020	08:28 ALI	169/103				Williamson, Jim CRNP

**SaO2:**

<u>Date</u>	<u>Time</u>	<u>Value(%)</u>	<u>Air</u>	<u>Provider</u>
03/05/2020	08:28 ALI	97		Williamson, Jim CRNP

**Weight:**

<u>Date</u>	<u>Time</u>	<u>Lbs</u>	<u>Kg</u>	<u>Waist Circum.</u>	<u>Provider</u>
03/05/2020	08:28 ALI	185.2	84.0		Williamson, Jim CRNP



EX. 11(a)

Inmate Name: BROWN, AMIE M  
 Date of Birth: 06/06/1970  
 Encounter Date: 03/05/2020 08:22

Sex: F Race: WHITE  
 Provider: Williamson, Jim CRNP

Reg #: 71676-019  
 Facility: ALI  
 Unit: C02

**Exam Comments**

General: Well developed, well nourished female, Alert and Oriented x 3, anxious, crying, respirations unlabored.  
 Pulmonary: Clear to Auscultation, no wheezing, no rales, diminished lung sounds.  
 Cardiovascular: Regular Rate and Rhythm (RRR), Normal S1 and S2, no M/R/G  
 Abdomen: Normal BS, non-tender, no mass  
 Right arm swollen with purpuric rash to lower forearm

**ASSESSMENT:**

Pain, unspecified, R52 - Current

**PLAN:****New Consultation Requests:**

<u>Consultation/Procedure</u>	<u>Target Date</u>	<u>Scheduled Target Date</u>	<u>Priority</u>	<u>Translator</u>	<u>Language</u>
Emergency Room	03/05/2020	03/05/2020	Emergent	No	English

**Subtype:**

Offsite Eval

**Reason for Request:**

49 y/o with DX of breast cancer, HTN. She C/O sudden onset right lower chest pain radiating around to right back, starting last PM. She states "I can't catch my breath." C/O slight nausea, no vomiting. Right arm swollen with purpuric rash to lower forearm, pain. Describes chest pain as coming in waves, sharp, 10/10. Denies cough, fever, chills. Please evaluate for Poss. PE.

**Disposition:**

Transfer to Local Hospital

**Patient Education Topics:**

<u>Date Initiated</u>	<u>Format</u>	<u>Handout/Topic</u>	<u>Provider</u>	<u>Outcome</u>
03/05/2020	Counseling	Plan of Care	Williamson, Jim	Verbalizes Understanding

Copay Required: No

Cosign Required: No

Telephone/Verbal Order: No

Completed by Williamson, Jim CRNP on 03/05/2020 08:41



EX. 11(b)

FCI Aliceville

## AFTER VISIT SUMMARY

 BAPTIST

Amie Brown MRN: 13877396

3/5/2020 BMH Golden Triangle Emergency Department 662-244-1000

76076-019

## Instructions

Follow-up with your oncologist as already scheduled or planned

**Your medications have changed**

- START taking:  
HYDROcodone-acetaminophen (NORCO)  
promethazine (PHENERGAN)

Review your updated medication list below.

**Pick up these medications from any pharmacy with your printed prescription**

HYDROcodone-acetaminophen • promethazine

**Follow up with Your oncology doctor**

Why: As already scheduled or planned

## Today's Visit

Your Care Team, during this visit, consisted of: Joel Alan Butler, MD

**Reason for Visit**

- Arm Swelling
- Chest Pain
- Shortness of Breath

**Diagnoses**

- Metastatic breast cancer
- Secondary liver cancer
- Secondary cancer of bone

**Lab Tests Completed**

Amylase  
CBC and differential  
CMP  
Lipase  
Troponin I  
Urinalysis Auto Microscopic

**Imaging Tests**

CT Chest Abdomen Pelvis With Contrast  
ECG 12 lead (Now)  
EKG 12 lead ED Documentation  
X-Ray Chest Portable



## Today's Visit (continued)

### Done Today

Insert peripheral IV  
Message To Nursing

### Medications Given

ioHEXol (OMNIPAQUE) 350 mg iodine/mL injection 100 mL Last given at 11:55 AM  
ketorolac (TORADOL) 30 mg/mL (1 mL) injection 30 mg Last given at 1:00 PM

### Your End of Visit Vitals



Blood Pressure  
176/88



Weight  
180 lb (81.6 kg)



Height  
5' 1" (1.549 m)



Temperature (Oral)  
98 °F (36.7 °C)



Pulse  
80



Respiration  
19



Oxygen Saturation  
100%

## What's Next

You currently have no upcoming appointments scheduled.

## Things you need to do

Follow up with Your oncology doctor  
As already scheduled or planned

## Your Results

### CT Chest Abdomen

#### Pelvis With Contrast

Collected on 3/5/2020

Resulted on 3/5/2020

Authorized by

Joel Alan Butler, MD

Resulting Agency:

BOC IMG RAD

350 N. Humphreys Blvd

Memphis TN 38120

### Narrative

Reason for Study: Sepsis, Chest pain abdominal pain elevated lipase 100 cc Omnipaque 12 mm circumscribed noncalcified nodule in left lower lobe. The lungs are otherwise normal. No pleural abnormalities. Incidental aberrant origin of the right subclavian artery. Mildly prominent node in the aortopulmonary window that measures 16 mm and adjacent node that measures 13 mm. There are multiple hepatic metastatic lesions. There is iliac adenopathy versus arising from the liver compatible with neoplastic disease. Adrenal glands are normal. Kidneys are normal. No periaortic adenopathy. No pelvic adenopathy. Pelvic organs are unremarkable. Urinary bladder is normal. No free air free fluid or inflammation. Lytic change lateral aspect of T9 vertebral body. No other suspicious bone lesions. There are multifocal nodularity in the right breast in the retroareolar area and in the inferior aspect of the right breast there is a 2.4 cm mass. There is marked abnormal skin thickening. There is 2.6 cm right axillary node.

### Impression

IMPRESSION: Findings as described above compatible with widespread metastatic disease. I suspect this is a right breast primary



Ex. 11(d)

## Your Results (continued)

**X-Ray Chest Portable**

Collected on 3/5/2020

Resulted on 3/5/2020

Authorized by

Joel Alan Butler, MD

Resulting Agency:

BOC IMG RAD

350 N. Humphreys Blvd

Memphis TN 38120

**TROPONIN**

Collected on 3/5/2020

Resulted on 3/5/2020

Authorized by

Joel Alan Butler, MD

Resulting Agency:

BAPTIST MEMORIAL

HOSPITAL-GOLDEN TRIANGLE

2520 5th Street North

Columbus MS 39701

Specimen: Blood

**Narrative**

Clinical pain Heart normal. Mediastinum is unremarkable. Lungs are clear. No pleural abnormalities are seen.

**Impression**

Impression: no active disease

**Troponin****<0.015** ng/mL

Reference Range

0.000 - 0.045



Ex. 11(e)

## Your Results (continued)

**COMPREHENSIVE  
METABOLIC PANEL**

Collected on 3/5/2020

Resulted on 3/5/2020

Authorized by

Joel Alan Butler, MD

Resulting Agency:

BAPTIST MEMORIAL  
HOSPITAL-GOLDEN TRIANGLE

2520 5th Street North

Columbus MS 39701

Specimen: Blood

Sodium

**141** mmol/L

Reference Range 135 - 145

▼ Potassium

**3.3** mmol/L

Reference Range 3.5 - 5.0

▲ Chloride

**111** mmol/L

Reference Range 98 - 107

CO2

**22** mmol/L

Reference Range 21 - 32

Anion gap

**8** mmol/L

Reference Range 6 - 16

Glucose

**94** mg/dL

Reference Range 70 - 110

BUN

**9** mg/dL

Reference Range 7 - 18

Creatinine

**0.66** mg/dL

Reference Range 0.60 - 1.30

BUN/Creatinine Ratio

**13.6**

Reference Range 11.7 - 13.9

Calcium

**9.0** mg/dL

Reference Range 8.5 - 10.1

Comment: Calcium measurements are adversely affected by the use of Omniscan during MRI. Analysis of calcium is not recommended for 12 to 24 hours after the use of the contrast agent.

Protein total

**6.6** g/dL

Reference Range 6.4 - 8.2

▼ Albumin

**3.0** g/dL

Reference Range 3.4 - 5.0



EX. 11(7)

## Your Results (continued)

Bilirubin total

**0.5** mg/dL

Reference Range 0.0 - 1.0

Comment: Use of this assay is not recommended for patients undergoing treatment with eltrombopag due to the potential for falsely elevated results.

^ AST

**53** U/L

Reference Range 7 - 34

ALT

**60** U/L

Reference Range 16 - 62

^ ALP

**143** U/L

Reference Range 50 - 136

eGFR non-African American

**> 60.0** mL/min/1.73m<sup>2</sup>Reference Range  $\geq 60.0$ 

eGFR African American

**> 60.0** mL/min/1.73m<sup>2</sup>Reference Range  $\geq 60.0$ 

Comment: The estimated GFR is based on the Modification of Diet in Renal Disease Study (MDRD) equation using average adult body surface area. This equation has not been validated for use with age groups below 18 or over 70, pregnant women, patients with serious co-morbid conditions, or persons with extremes of body size, muscle mass or nutritional status.

**AMYLASE**

Collected on 3/5/2020

Resulted on 3/5/2020

Authorized by

Joel Alan Butler, MD

Resulting Agency:

BAPTIST MEMORIAL

HOSPITAL-GOLDEN TRIANGLE

2520 5th Street North

Columbus MS 39701

Specimen: Blood

Amylase

**73** U/L

Reference Range

25 - 115



EX, 11(3)

## Your Results (continued)

**CBC WITH  
DIFFERENTIAL**

Collected on 3/5/2020

Resulted on 3/5/2020

Authorized by

Joel Alan Butler, MD

Resulting Agency:

BAPTIST MEMORIAL

HOSPITAL-GOLDEN TRIANGLE

2520 5th Street North

Columbus MS 39701

Specimen: Blood

<b>WBC</b> <b>8.2</b> K/uL Reference Range 5.0 - 10.0	<b>▼ RBC</b> <b>3.56</b> M/uL Reference Range 4.10 - 5.40	<b>▼ Hemoglobin</b> <b>10.6</b> g/dL Reference Range 12.0 - 16.0
<b>▼ Hematocrit</b> <b>32.2</b> % Reference Range 37.0 - 47.0	<b>MCV</b> <b>90.4</b> fL Reference Range 80.0 - 97.0	<b>MCH</b> <b>29.8</b> pg Reference Range 27.0 - 32.0
<b>MCHC</b> <b>32.9</b> g/dL Reference Range 32.0 - 36.0	<b>RDW SD</b> <b>42.4</b> fL Reference Range 36.4 - 46.3	<b>Platelet</b> <b>246</b> K/uL Reference Range 150 - 500
<b>MPV</b> <b>9</b> fL Reference Range 7.4 - 10.4	<b>Absolute Neutrophil</b> <b>5.8</b> K/uL Reference Range 2.5 - 7.5	<b>Lymphocyte Absolute</b> <b>1.7</b> K/uL Reference Range 1.0 - 4.0
<b>Monocytes Absolute, Automated</b> <b>0.46</b> K/uL Reference Range 0.05 - 0.60	<b>Absolute Eosinophil</b> <b>0.17</b> K/uL Reference Range 0.05 - 0.50	<b>Basophil Absolute</b> <b>0.05</b> K/uL Reference Range 0.00 - 0.10
<b>▲ Absolute Immature Granulocytes</b> <b>0.04</b> K/uL Reference Range <=0.00	<b>Neutrophil percent</b> <b>70.7</b> % Reference Range 50.0 - 75.0	<b>Lymphocyte percent</b> <b>20.5</b> % Reference Range 20.0 - 40.0
<b>Monocyte percent</b> <b>5.6</b> % Reference Range 0.0 - 6.0	<b>Eosinophil percent</b> <b>2.1</b> % Reference Range 0.0 - 6.0	<b>Basophil percent</b> <b>0.6</b> % Reference Range 0.0 - 1.0
<b>▲ Immature Granulocytes percent</b> <b>0.50</b> % Reference Range <=0.00	<b>NRBC Percent</b> <b>0.0</b> /100 Reference Range 0.0 - 2.0	<b>NRBC Absolute</b> <b>0.000</b> K/uL Reference Range 0.00 - 0.012



Ex. 11 (h)

## Your Results (continued)

**LIPASE**

Collected on 3/5/2020

Resulted on 3/5/2020

Authorized by

Joel Alan Butler, MD

Resulting Agency:

BAPTIST MEMORIAL

HOSPITAL-GOLDEN TRIANGLE

2520 5th Street North

Columbus MS 39701

Specimen: Blood

▲ Lipase

**472** U/L

Reference Range

73 - 393

**URINALYSIS WITH  
MICROSCOPIC**

Collected on 3/5/2020

Resulted on 3/5/2020

Authorized by

Joel Alan Butler, MD

Resulting Agency:

BAPTIST MEMORIAL

HOSPITAL-GOLDEN TRIANGLE

2520 5th Street North

Columbus MS 39701

Specimen: Urine

Color, UA <b>Light Yellow</b> Reference Range Yellow	Clarity, UA <b>Clear</b> Reference Range Clear	pH, UA <b>6.0</b> Reference Range 5.0 - 8.0
Specific gravity, UA <b>1.008</b> Reference Range 1.005 - 1.030	Glucose, UA <b>Negative</b> mg/ dL Reference Range Negative	Ketones, UA <b>Negative</b> mg/ dL Reference Range Negative
Bilirubin, UA <b>Negative</b> Reference Range Negative	Protein, UA <b>Negative</b> mg/ dL Reference Range Negative	Leukocytes, UA <b>Negative</b> Reference Range Negative
Nitrite, UA <b>Negative</b> Reference Range Negative	Occult blood, urine qualitative <b>Negative</b> Reference Range Negative	Urobilinogen, UA <b>Negative</b> E.U./ dL Reference Range 0.0 - 1.0
RBC, UA <b>12.4</b> RBC/ul Reference Range 0.0 - 23.0	WBC, UA <b>1.5</b> WBC/ul Reference Range 0.0 - 28.0	Squamous Epithelial, UA <b>1.1</b> Epi/ul Reference Range 0.0 - 31.0
Hyaline Cast, UA <b>0.13</b> Cst/ul Reference Range 0.00 - 2.00	Bacteria, UA <b>28.4</b> Bac/ul Reference Range 0.0 - 358.0	

**EKG 12-LEAD - PENDING**

Collected on 3/5/2020

Authorized by Joel Alan Butler, MD

## You are allergic to the following

Allergen

Cephalosporins

Reactions

Not Noted



Ex. 11 (i)



You are allergic to the following (continued)

Allergen	Reactions
Ciprofloxacin	Not Noted
Levaquin (Levofloxacin)	Not Noted
Penicillins	Not Noted

## Additional Information

This warning indicates that you may have received medications that could affect your ability to drive, operate heavy machinery, and make legal decisions. By my signature I acknowledge understanding of these risks.

During your stay your blood pressure was noted to be equal or greater than 120/80. This could indicate pre-hypertension or that your blood pressure could be more well-controlled. Please follow-up with your primary care provider in one week for blood pressure recheck.



EX. 11 (J)

(11)

## Changes to Your Medication List

### START taking these medications



START

**HYDROcodone-acetaminophen 7.5-325 mg tablet**

Commonly known as: NORCO

Take one tablet by mouth every 6 (six) hours as needed



START

**promethazine 25 MG tablet**  
Commonly known as: PHENERGAN

Take one tablet (25 mg total) by mouth every 6 (six) hours as needed for nausea

### ASK your doctor about these medications



ASK

**busPIRone 30 MG tablet**  
Commonly known as: BUSPAR

Take 30 mg by mouth 2 (two) times a day



ASK

**ferrous sulfate 325 MG (65 FE) tablet**

Take 325 mg by mouth daily with breakfast



ASK

**ibuprofen 800 MG tablet**  
Commonly known as: MOTRIN

Take 800 mg by mouth every 6 (six) hours as needed for pain

**\*\*All medications must be taken as prescribed and contact your physician before stopping any medications\*\***

---

### MyChart Sign-Up

Send messages to your doctor, view your test results, renew your prescriptions, schedule appointments, and more.

Go to <https://mychart.bmhcc.org/prd/>, click "Sign Up Now", and enter your personal activation code: VCQMC-ZT93Z-3FXKJ. Activation code expires 6/3/2020.





BMH Golden Triangle Emergency Department  
2520 5th Street, North  
Columbus MS 39701



Date: Mar 5, 2020  
Time: 1:36 PM

Patient Name: **Amie Brown**

1107 HWY 14  
ALICEVILLE AL 35442

Age: 49

DOB: 06/06/1970

RX: promethazine (PHENERGAN) 25 MG tablet

Sig: Take one tablet (25 mg total) by mouth every 6 (six) hours as needed for nausea

Qty: \*\*12 (Twelve) tablet\*\*

Start: Mar 5, 2020

Refill: \*\*0 (Zero)\*\*

Route: Oral

Signature:

Joel Alan Butler, MD

Signature:

Joel Alan Butler, MD

Dispense as written

Substitutions Allowed

NPI: 1326081985

Joel Alan Butler, MD  
2520 5th Street, North  
Columbus MS 39705  
662-244-1000

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Diagonal repeating "watermark" consisting of variable data from the document, located on front or back of page

Area of very small print which must be read under magnification found wherever the MP symbol appears

Warning Box describing the security features contained within this document





BMH Golden Triangle Emergency Department  
2520 5th Street, North  
Columbus, MS 39701



Date: Mar 5, 2020  
Time: 1:36 PM

Patient Name: **Amie Brown**

1107 HWY 14

ALICEVILLE AL 35442

Age: 49

DOB: 06/06/1970

RX: HYDROcodone-acetaminophen (NORCO) 7.5-325 mg tablet

Sig: Take one tablet by mouth every 6 (six) hours as needed

Qty: \*\*12 (Twelve) tablet\*\*

Start: Mar 5, 2020

Refill: \*\*0 (Zero)\*\*

Route: Oral

Signature:

Joel Alan Butler, MD

Dispense as written

Signature:

Joel Alan Butler, MD

Substitutions Allowed

NPI: 1326081985

DEA: BB0476374 (MS)

Joel Alan Butler, MD

2520 5th Street, North

Columbus, MS 39705

662-244-1000

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**Bureau of Prisons  
Health Services  
Clinical Encounter**

Inmate Name: BROWN, AMIE M	Sex: F Race: WHITE	Reg #: 71676-019
Date of Birth: 06/06/1970	Provider: Williamson, Jim CRNP	Facility: ALI
Encounter Date: 03/06/2020 11:05		Unit: C02

Mid Level Provider - Follow up Visit encounter performed at Health Services.

**SUBJECTIVE:**

**COMPLAINT 1**      **Provider:** Williamson, Jim CRNP

**Chief Complaint:** Pain

**Subjective:** Here for follow up. Sent to ED yesterday for severe pain. CT shows widespread metastatic disease. Oxycodone ordered for pain, she states the pain medication is helping. She denies shortness of breath or chest pain. BP remains elevated. She also requests increase on Buspar.

**Pain:** No

**ROS:**

**Cardiovascular**

**General**

Yes: Within Normal Limits

**Pulmonary**

**Respiratory System**

Yes: Within Normal Limits

**Psychiatric**

**General**

Yes: Anxious

**OBJECTIVE:**

**Blood Pressure:**

<u>Date</u>	<u>Time</u>	<u>Value</u>	<u>Location</u>	<u>Position</u>	<u>Cuff Size</u>	<u>Provider</u>
03/06/2020	11:10	ALI	149/95			Williamson, Jim CRNP

**Exam Comments**

General: Well developed, well nourished female, Alert and Oriented x 3, no acute distress

Pulmonary: Clear to Auscultation, no wheezing, no rales

Cardiovascular: Regular Rate and Rhythm (RRR), Normal S1 and S2, no M/R/G

Abdomen: Normal BS, non-tender, no mass

**ASSESSMENT:**

Essential (primary) hypertension, I10 - Current

Unspecified mood [affective] disorder, F39 - Current

**PLAN:**

**New Medication Orders:**

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>
	Lisinopril Tablet	03/06/2020 11:05
	<b><u>Prescriber Order:</u></b> 20mg Orally - Two Times a Day x 365 day(s)	
	<b><u>Indication:</u></b> Essential (primary) hypertension	
	busPIRone Tablet	03/06/2020 11:05
	<b><u>Prescriber Order:</u></b> 15mg Orally - Two Times a Day x 180 day(s) -- Take 2 Tabs (30mg) twice	



EX. 13

**Bureau of Prisons  
Health Services  
Clinical Encounter - Administrative Note**

Inmate Name: BROWN, AMIE M	Sex: F Race: WHITE	Reg #: 71676-019
Date of Birth: 06/06/1970	Provider: McDaniel, Robyn RN	Facility: ALI
Note Date: 03/08/2020 19:33		Unit: C02

Admin Note - Orders encounter performed at Health Services.

**Administrative Notes:**

**ADMINISTRATIVE NOTE 1**

**Provider:** McDaniel, Robyn RN

Spoke with on call provider. Order given for 10mg Oxycodone BID PRB. RBVO.

**New Medication Orders:**

<u><b>Rx#</b></u>	<u><b>Medication</b></u>	<u><b>Order Date</b></u>
	oxyCODONE HCl Tablet	03/08/2020 19:33
	<u><b>Prescriber Order:</b></u> 10 mg Orally - Two Times a Day PRN x 3 day(s) Pill Line Only	
	<b>Start Now:</b> Yes	
	<b>Night Stock Rx#:</b>	
	<b>Source:</b> Pyxis	
	<b>Admin Method:</b> Pill Line	
	<b>Stop Date:</b> 03/11/2020 19:32	
	<b>MAR Label:</b> 10-mg Orally - Two Times a Day PRN x 3 day(s) Pill Line Only	
	<b>One Time Dose Given:</b> No	

**Discontinued Medication Orders:**

<u><b>Rx#</b></u>	<u><b>Medication</b></u>	<u><b>Order Date</b></u>
	oxyCODONE HCl Tablet	03/08/2020 19:33
	<u><b>Prescriber Order:</b></u> 10 mg Orally - Two Times a Day PRN x 3 day(s) Pill Line Only	
	<b>Discontinue Type:</b> When Pharmacy Processes	
	<b>Discontinue Reason:</b> Order changed	
	<b>Indication:</b>	

**Copay Required:** No **Cosign Required:** Yes

**Telephone/Verbal Order:** Yes **By:** Li, Xinyu MD/CD

**Telephone or Verbal order read back and verified.**

Completed by McDaniel, Robyn RN on 03/08/2020 19:34

Requested to be cosigned by Li, Xinyu MD/CD.

Cosign documentation will be displayed on the following page.



Aliceville, AL 35442  
United States



LEGAL  
MAIL

⇔71676-019⇔  
U S District Court  
c/o Clerk of Court  
75 Spring ST  
Room 2211  
Atlanta, GA 30303  
United States

**CLEARED**  
MAR 5 2020  
U.S. Marshall  
Atlanta, GA

P  
PART 1 of 2



71676-019

Amie Brown  
Federal Correctional Institution  
PO BOX 4000  
Aliceville, AL 35442  
United States



LEGAL  
MAIL

71676-019

U S District Court  
c/o Clerk of Court  
75 Spring ST  
Room 2211  
Atlanta, GA 30303  
United States

PART 2 OF 2

U.S. DISTRICT COURT  
MAR 26 2020  
ATLANTA, GA